



**FIT**  
Fashion Institute  
of Technology

Seventh Avenue at 27 Street  
New York City 10001-5992  
www.fitnyc.edu

Student ID#

## NEW YORK STATE RESIDENCY APPLICATION

\*If you have graduated from a NYS high school within the last 5 years, do not complete this application. (Submit transcripts and diploma showing date of graduation directly to the office of Admissions)

Copies of all the following documentation must be submitted with application:

Lease/proof of home ownership, and New York State ID, and Federal income tax return (1040 form), and New York State income tax return (IT201 or IT203 form), and W2s

### Section A – All information in Section A must be completed.

Name:			Address:		
_____	_____	_____	_____	_____	_____
Last	First	MI	Street		
Email: _____			_____		
			City	State	Zip
SSN: _____		Phone: ( ) _____	County: _____		
Length of time at this address _____ If less than three years, list prior addresses below					
Years/Months					
<b>(required: attach lease/ proof of home ownership)</b>					
From	To	Street	City	State	
_____					
Age _____	Date of Birth _____	Marital Status _____	US Citizen?	_____	
				Y/N	
<b>(Non-US Citizens)</b>					
List your permanent resident number or visa type _____				Date issued _____	
<b>(required for non-US citizens: attach permanent resident card or visa)</b>					
Are you a first-time SUNY student? _____			Are you a graduate or undergraduate student? _____		
Y/N					
Have you ever received a New York State award? (TAP, Regents Scholarship, Empire state fellowship etc.) _____					
Y/N					
Have you had or will you be applying for a Stafford Loan? (formerly the Guaranteed Student Loan) _____					
Y/N					
Do you have a driver's license or state ID? _____			If yes, in what state was your license issued? _____		
Y/N			<b>(required: attach NY state ID)</b>		
Do you own a car? _____			If yes, in what state is your car registered? _____		
Y/N			(optional: attach vehicle registration)		
Are you a registered voter? _____			If yes, in what state are you registered? _____		
Y/N			(optional: attach voter registration)		
In what state did you file resident taxes for 2023? _____			Where will you file for 2024? _____		
<b>(required: attach federal (1040 form) and state (IT201 or IT203 form) income tax returns and W2s)</b>					

**Incomplete applications will delay processing**





# Student Budget Form

Administrative Office of the Bursar Phone: 212-217-3720 Fax: 212-217-3721

Complete this form only if you are an independent student under 24 years old.

\_\_\_\_\_ @ \_\_\_\_\_  
Last Name, First Name Student ID

Check appropriate box:

- I have my own apartment
- I share an apartment
- I live with a parent or other relative

**Please itemize your expenses and income for the previous 12 months:**

EXPENSES PER YEAR

Rent/Mortgage	\$ _____
Utilities	\$ _____
Food	\$ _____
Transportation	\$ _____
Personal	\$ _____
Tuition	\$ _____
Educational Supplies	\$ _____
Other (explain below)	\$ _____
<b>TOTAL</b>	<b>\$ _____</b>

RESOURCES PER YEAR

Earnings	\$ _____
Financial Aid	\$ _____
Other Income (Please explain below)	\$ _____
<b>TOTAL</b>	<b>\$ _____</b>

Please use this section to explain any unusual circumstances:

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Attach appropriate documentation to back up your financial independence.

Signature \_\_\_\_\_ Date \_\_\_\_\_



## ALTERNATE LEASE STATEMENT

Name of the Student \_\_\_\_\_ Semester \_\_\_\_\_  
Last First MI

Student ID # \_\_\_\_\_ Phone # (\_\_\_\_) \_\_\_\_\_

Address \_\_\_\_\_ Apt # \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

E-Mail \_\_\_\_\_

I lived at the above address from \_\_\_\_\_ to \_\_\_\_\_ but the lease is NOT in my name.  
Month/Day/Year Month/Day/Year

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**TO BE COMPLETED BY THE PERSON WHOSE NAME APPEARS ON THE LEASE OR CONTRACT**

I \_\_\_\_\_ certify that I reside at the address indicated above and  
Owner/Lease Name

\_\_\_\_\_ has resided with me from \_\_\_\_\_ to \_\_\_\_\_.  
Student's Name Month/Day/Year Month/Day/Year

Proof that I have resided at the above address for one year is attached (e.g. lease, telephone bill, utility bill, apartment or house insurance, mortgage statement).

Signed \_\_\_\_\_ Date \_\_\_\_\_

**NOTARIZED**

Sworn before me this \_\_\_\_\_ day of the month of \_\_\_\_\_, 20\_\_\_\_\_

\_\_\_\_\_  
Notary Public

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I certify that the above information is accurate and complete. I understand that this information may affect my residency status at the college.

I understand that if I provide false information or withhold relevant information in order to obtain resident status, Fashion Institute of Technology may revoke its determination of in-state residency, and that I will owe non-resident tuition for each semester or session that I have attended under these circumstances. I also understand that I may be subject to disciplinary action.

Signed \_\_\_\_\_ Date \_\_\_\_\_

**NOTARIZED**

Sworn before me this \_\_\_\_\_ day of the month of \_\_\_\_\_, 20\_\_\_\_\_

\_\_\_\_\_  
Notary Public