

# UNIVERSITY OF HAWAII AT MĀNOA ▪ OFFICE OF GRADUATE EDUCATION

Student Services • 2540 Maile Way, Spalding 354 • Honolulu, HI 96822

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## RESIDENCY REGULATIONS (Condensed)

(The residency rules and regulations may be subject to change)

Students who do not qualify as bona fide residents of the State of Hawaii, according to the University of Hawaii rules and regulations in effect at the time they register, must pay the nonresident tuition. An official determination of residency status will be made prior to enrollment. Applicants may be required to provide documentation to verify residency status. Once classified as a nonresident, a student continues to be so classified during his/her term at the college until he/she can present clear and convincing evidence to the residency officer that proves otherwise.

Some of the more pertinent University residency regulations follow. The complete rules and regulations are available from the office listed below. For additional information or interpretation, contact:

Residency Counselor  
Office of Admissions and Records  
Queen Lili'uokalani Center for Student Services, Room 001  
2600 Campus Road, Honolulu, HI 96822  
Tel: 808.956.8975 or 1.800.823.9771  
Web: <http://manoa.hawaii.edu/admissions/undergrad/financing/residency.html>

## DEFINITION OF HAWAII RESIDENCY

A student is deemed a resident of the State of Hawaii for **tuition purposes** if the student (19\* or older) or the student (under 19\*) and his/her parents or legal guardians have:

- (1) **Demonstrated intent** to permanently reside in Hawaii (see below for evidences);
- (2) Been **physically present** in Hawaii for the 12 consecutive months prior to the first day of instruction, and subsequent to the demonstration of intent to make Hawaii his/her legal residency; and
- (3) The student, whether adult or minor, **has not been claimed as a dependent for tax purposes** for at least 12 consecutive months prior to the first day of instruction by his/her parents or legal guardians who are not legal residents of Hawaii.

To demonstrate the intent to make Hawaii your legal residency, the following evidence apply:

- A. Filing Hawaii resident personal income tax return.
- B. Voting/registering to vote in the State of Hawaii.

Other evidence, such as permanent employment and ownership or continuous leasing of a dwelling in Hawaii, may apply but **no single act is sufficient to establish residency in the State of Hawaii**.

Other legal factors in making a residency determination include:

- A. The 12 months of continuous residency in Hawaii shall begin on the date upon which the first overt action (see evidences) is taken to make Hawaii the permanent residence. Residence will be lost if it is interrupted during the 12 months immediately preceding the first day of instruction.
- B. Residency in Hawaii and residency in another place cannot be held simultaneously.
- C. Presence in Hawaii primarily to attend an institution of higher learning does not create residence status. **A nonresident student enrolled for 6 credits or more during any term within the 12-month period is presumed to be in Hawaii primarily to attend college. Such periods of enrollment cannot be applied toward the physical presence requirement.**
- D. The residency of unmarried students who are minors follows that of the parents or legal guardian. Marriage emancipates a minor.
- E. Resident status, once acquired, will be lost by future voluntary action of the resident inconsistent with such status. However, Hawaii residency will not be lost solely because of absence from the State while a member of the United States Armed Forces, while engaged in navigation, or while a student at any institution of learning, provided that Hawaii is claimed and maintained as the person's legal residence.

\*The age of majority is 18 years. However, a person between the ages of 18 and 19, unless emancipated, cannot claim residency solely on the basis of himself/herself because he/she does not have the minimum 12 months residency which commences on his/her 18th birthday.

## **BOARD OF REGENTS EXEMPTIONS - (Section C - Exemptions from the Nonresident Tuition Differential)**

### **1. Nonresidents may be allowed to pay resident tuition if they qualify as one of the following:**

- A. Full-time employees of the University of Hawai'i and their spouses and legal dependents
- B. Native Hawaiians, descendants of the aboriginal peoples that inhabited the Hawaiian Islands and exercised sovereignty in the Hawaiian Islands in 1778
- C. United States military personnel, their spouses and their authorized dependents (up to age 23) during the period the military personnel is stationed in Hawai'i on active duty
- D. Members of the Hawai'i National Guard and Hawai'i-based Reserve who are under contract in Hawai'i
- E. Veterans discharged within three years of enrollment and eligible for GI Bill Educational Benefits
- F. Individuals eligible to use transferred Post 9/11 GI Bill or Montgomery GI Bill Active Duty educational benefits, and enrolling within 3 years of the Veteran's discharge
- G. Individuals eligible to use Post 9/11 GI Bill educational benefits under the John D. Fry Scholarship, and enrolling within 3 years of the Service member's death in the line of duty.

### **2. Citizens of an eligible Pacific island district, commonwealth, territory, or insular jurisdiction, state or nation which does not provide public institutions that grant baccalaureate degrees may be allowed to pay 150% of the resident tuition. At the time of publication, these included the following:**

American Samoa  
Commonwealth of the Northern Marianas  
Cook Islands  
Federated States of Micronesia  
Futuna  
Kiribati  
Nauru  
Niue  
Republic of the Marshall Islands  
Republic of Belau (Palau)  
Solomon Islands  
Tokelau  
Tonga  
Tuvalu  
Vanuatu  
Wallis

This list is subject to change. For a current list, eligibility and documentation requirements, please contact the Admissions Office of the campus you are applying to.

### **MISREPRESENTATION**

A student or prospective student who provides incorrect information on any form or document intended for use in the determination of residency status for tuition purposes will be subject to the requirements and/or disciplinary measures provided for in the rules and regulations governing residency status.

### **APPEAL PROCESS**

Residency decisions may be appealed by contacting the residency officer for information on how to initiate an appeal.

## RESIDENCY DECLARATION FORM

**INSTRUCTIONS:** Please type or print clearly. Submit completed form and appropriate documentation to the address above.

FOR OFFICE USE ONLY		<b>R N M F J S G C E H</b>		by _____ on _____	
<b>SEMESTER</b> <input type="checkbox"/> FALL 20__ <input type="checkbox"/> SPRING 20__ <input type="checkbox"/> SUMMER 20__		<b>GENDER</b> <input type="checkbox"/> FEMALE <input type="checkbox"/> MALE		<b>BIRTH DATE</b> MM DD YY / /	
				UH ID (if available)	
<b>FAMILY / LAST NAME</b>		<b>FIRST NAME</b>		<b>FULL MIDDLE</b>	
<b>CURRENT MAILING ADDRESS</b>			<b>CITY / PROVINCE</b>	<b>STATE / COUNTRY</b>	<b>ZIP / POSTAL CODE</b>
<b>CURRENT ADDRESS VALID UNTIL</b> MM DD YY / /		<b>TELEPHONE</b> Area Code ( )		<b>EMAIL ADDRESS</b>	
<b>CITIZENSHIP</b> (If not U.S. citizen, indicate immigrant status at right.) <input type="checkbox"/> United States <input type="checkbox"/> Other Specify Country _____				<b>IMMIGRANT STATUS</b> <input type="checkbox"/> U.S. Permanent Resident Date Received (MM/DD/YY) _____ Registration Number _____	

I certify that the responses provided on this Residency Form are complete and true to the best of my knowledge and belief. I agree to produce certified documents relative to the determination of my residency status upon request and that the provision of incorrect information regarding my residency declaration will also subject me to the requirements and/or disciplinary measures provided by the University's rules and regulations governing the determination of residency for admission and tuition purposes. Further I understand that the UH System shares a common database and information pertaining to me may be accessed by all UH campuses.

APPLICANT SIGNATURE: \_\_\_\_\_ DATE \_\_\_\_\_

### SECTION A

I claim legal residency in (check one):  Hawai'i  Other State or Country \_\_\_\_\_ since \_\_\_\_\_  
List state or country. (month/year)

**YES NO Check the appropriate box.**

- |                          |                          |   |
|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | I have been present in Hawai'i continuously for the last 13 months  |
| <input type="checkbox"/> | <input type="checkbox"/> | I have filed a Hawai'i Individual Tax Return as a resident for the last two years   |
| <input type="checkbox"/> | <input type="checkbox"/> | I am registered to vote. If yes, in which state? _____  |
| <input type="checkbox"/> | <input type="checkbox"/> | I voted in the last election. If yes, in which state? _____   |
| <input type="checkbox"/> | <input type="checkbox"/> | My Parent(s)/Legal Guardian(s) claimed me on their Personal Income Tax. (If yes, SECTION A2 must be completed by your parent or legal guardian. If yes, which state? _____) |
| <input type="checkbox"/> | <input type="checkbox"/> | I am less than 19 and unmarried. (If yes, SECTION A2 must be completed by your parent or legal guardian.)   |

### SECTION A2

**YES NO Parent/legal guardian: Please complete this section.**

- |                          |                          |   |
|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | I (parent/legal guardian) claim legal residency in the State of Hawai'i                                   |
| <input type="checkbox"/> | <input type="checkbox"/> | I (parent/legal guardian) have been present in Hawai'i continuously for the last 13 months                |
| <input type="checkbox"/> | <input type="checkbox"/> | I (parent/legal guardian) have filed a Hawai'i Individual Tax Return as a resident for the last two years |
| <input type="checkbox"/> | <input type="checkbox"/> | I (parent/legal guardian) am registered to vote. If yes, in which state? _____                            |
| <input type="checkbox"/> | <input type="checkbox"/> | I (parent/legal guardian) have voted in the last election. If yes, in which state? _____                  |
| <input type="checkbox"/> | <input type="checkbox"/> | I (parent/legal guardian) am a US citizen   |
| <input type="checkbox"/> | <input type="checkbox"/> | If not a US citizen: I (parent/legal guardian) have been a Permanent Resident for more than one year      |

Relationship to Applicant: \_\_\_\_\_

I (parent/ legal guardian) certify that responses provided in this section are complete and true to the best of my knowledge.

Parent/Legal Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Name of Applicant	Date of Birth (MM/DD/YY)
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**SECTION B – College Enrollment**

This past year, I enrolled in a publically supported college or university outside of the State of Hawai'i.  **YES**  **NO** If NO skip to Section C)

I paid the following tuition at that institution:

- Resident
- Nonresident
- Resident, due to nonresident exemption based on: \_\_\_\_\_  
(specify type of exemption)

**SECTION C – Exemptions from the Nonresident Tuition Differential**

Indicate if any of the following exemptions from the non-resident tuition differential apply to you (documentation required). See page 2, Board of Regents Exemptions.

- None of the exemptions apply to me
- I am a full-time faculty or staff member of the University of Hawai'i, or a spouse or legal dependent of such a person. *(Attach employment contract.)*
- I am Hawai'iian and a resident of another state. *(Attach an official copy of your Birth Certificate, and, if necessary, that of your parents/grandparents documenting Hawaiian ancestry.)*
- I am a citizen of \_\_\_\_\_ which has no public institution of higher education granting baccalaureate degrees.  
*(See country list on page 2)*
- I am a member or authorized dependent of a member of the U.S. armed forces on active duty, stationed in Hawai'i. *(Complete below Verification of U.S. Armed Forces below and attach military orders.)*
- I am a member of the Hawai'i National Guard or Hawai'i-based Reserves. *(Complete below Verification of U.S. Armed Forces below and attach military orders)*
- I am a veteran discharged within three years of enrollment and eligible for GI Bill Educational Benefits. *(Complete the Veteran Exemption form, p.5.)*
- I am an individual eligible to use transferred Post 9/11 GI Bill or Montgomery GI Bill Active Duty educational benefits, and am enrolling within 3 years of the Veteran's discharge. *(Complete the Individuals with Transferred Benefit Exemption form, p.5)*
- I am eligible to use Post 9/11 GI Bill educational benefits under the John D. Fry Scholarship, and am enrolling within 3 years of the Service member's death in the line of duty. *(Complete the John D. Fry Veteran Scholarship Exemption form, p 5.)*

**VERIFICATION OF U.S. ARMED FORCES MEMBER'S ASSIGNMENT IN HAWAI'I**

(military orders must be attached)

To be completed by the Member's Commanding Officer:

\_\_\_\_\_  
Name, rank & branch of service of active duty military member stationed in Hawai'i, member of the Hawai'i National Guard or Hawai'i-based Reserves and assigned to my unit or organization.

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ Estimated date (mm/dd/yyyy) of rotation from Hawai'i or separation from military service (whichever is earlier)  
Do not use "indefinite"

Member's Relationship to Applicant:  Self  Spouse  Parent  Other (specify) \_\_\_\_\_

Permission is hereby granted to release information to UH campus:

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Military Member's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Commanding Officer Name

\_\_\_\_\_  
Rank and Branch of Service in Hawai'i

\_\_\_\_\_  
Commanding Officer's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Phone Number of Branch of Service in Hawai'i

Complete this section if you are using VA Educational Benefits. Attach supporting document(s) as listed below.

**Deadline to apply: Prior to the first day of instruction of the term.**

Name \_\_\_\_\_ School Term (semester/year) \_\_\_\_\_  
Print Last Name, First Name, Middle Initial(s)

Phone Number \_\_\_\_\_ UH ID# or Birth Date (month/day) \_\_\_\_\_ UH Campus **MANOA**

- Status (check one)  New Student (never attended UH)  
 Returning Student (previously attended UH, re-applying for admissions)  
 Continuing student (currently enrolled)

### Veteran Exemption to Non-Resident Tuition Rate

UH Board of Regents Eligibility Policy (RP 6.208): Veterans eligible to use Post 9/11 GI Bill® or Montgomery GI Bill® Active Duty educational benefits, who live in Hawai'i, and enroll at the University within three years of discharge from a period of active duty service of 90 days or more.

Date of Discharge (attach **DD-214**) \_\_\_\_\_ Length of time on active duty service \_\_\_\_\_  
month/day/year (example: 1 year, two months)

Are you eligible to use Post 9/11 GI Bill® (Ch. 33) or Montgomery GI Bill® Active Duty (Ch. 30) educational benefits?

- Yes (attach **VA Certificate of Eligibility**)  
 No

If I have a break in attendance (stop out), excluding summer term, I understand that I have to re-apply for admission s. (This does not include approved Leave of Absences (LOA) for graduate students.) Consult the Veteran Affairs office for Returning Student Veteran Exemption requirements.

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

### Individuals with Transferred Post 9/11 GI Bill® (Ch. 33) or Montgomery GI Bill® Active Duty (Ch. 30) Educational Benefits Exemption to Non-Resident Tuition Rate

UH Board of Regents Eligibility Policy (RP 6.208): Individuals eligible to use transferred Post 9/11 GI Bill® or Montgomery GI Bill® Active Duty educational benefits, who live in Hawai'i, and enroll at the University within three years of the transferor's discharge from a period of active duty service of 90 days or more.

Are you the recipient of transferred Post 9/11 GI Bill® (Ch. 33) or GI Bill® Active Duty (Ch. 30) educational benefits?

- Yes (attach **VA Certificate of Eligibility**)  
 No

Name of Veteran \_\_\_\_\_  
Print Last name, First Name, Middle Initial(s)

Date of Veteran's Discharge (attach **DD-214**) \_\_\_\_\_ Length of time on active duty service \_\_\_\_\_  
Month/day/year example: 1 year, two months

If I have a break in attendance (stop out), excluding summer term, I understand that I have to re-apply for admission s. (This does not include approved Leave of Absences (LOA) for graduate students.) Consult the Veteran Affairs office for Returning Student Veteran Exemption requirements.

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

### Post 9/11 GI Bill® John D. Fry Veteran Scholarship Exemption to Non-Resident Tuition Rate

UH Board of Regents Eligibility Policy (RP 6.208) Individuals eligible to use Post 9/11 GI Bill® educational benefits under the Marine Gunnery Sergeant John David Fry Scholarship, who live in Hawai'i, and enroll at the University within three years of the Service member's death in the line of duty following a period of active duty service of 90 days or more.

Are you eligible to use the educational benefits under the Post 9/11GI Bill® Marine Gunner Sergeant John David Fry Scholarship?

- Yes (attach **VA Certificate of Eligibility, and DD-214/DD-1300**)  
 No

If I have a break in attendance (stop out), excluding summer term, I understand that I have to re-apply for admission s. (This does not include approved Leave of Absences (LOA) for graduate students.) Consult the Veteran Affairs office for Returning Student Veteran Exemption requirements.

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