

FULL LEGAL NAME \_\_\_\_\_  
(Please Print) Last Name First Name Maiden or M.I.

MAILING ADDRESS:  
STREET \_\_\_\_\_  
CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

STUDENT ID (or SS#) \_\_\_\_\_

DATE OF BIRTH \_\_\_\_\_

REQUESTED EFFECTIVE TERM \_\_\_\_\_

**FOR OFFICE USE ONLY**

DATE RECEIVED: \_\_\_\_\_

ACTION: \_\_\_\_\_ CODE: \_\_\_\_\_

EFFECTIVE TERM: \_\_\_\_\_

ADDITIONAL DOCUMENTATION:

REQUESTED \_\_\_\_\_

RECEIVED \_\_\_\_\_

NOTIFICATION SENT: \_\_\_\_\_ DATE: \_\_\_\_\_

	STUDENT	
	BURSAR	
	RESIDENCY APPEAL COM.	

SIGNATURE: \_\_\_\_\_

Date \_\_\_\_\_



MIAMI  
UNIVERSITY

O X F O R D O H I O

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**APPLICATION FOR RESIDENT CLASSIFICATION FOR TUITION PURPOSES**

SUBMIT COMPLETE APPLICATION AND REQUIRED DOCUMENTS TO:

Residency Officer  
Miami University  
Office of the Registrar  
301 S. Campus Avenue  
Oxford, Ohio 45056-3433

*All information is subject to change without notice.*

**OFFICE OF THE REGISTRAR, MIAMI UNIVERSITY**  
301 S. Campus Avenue, Oxford, Ohio 45056-3433

## PROCEDURES

Any student classified as a nonresident of the state of Ohio for tuition purposes may apply for resident status by submitting this Application for Resident Classification for Tuition Purposes. Each application will be reviewed in accordance with the Ohio Administrative Code 3333-1-10 and the criteria established by the Ohio Board of Regents Guidelines for Residency for State Subsidy and Tuition Purposes.

THE INTENT OF THE GUIDELINES IS TO EXCLUDE FROM RESIDENCY THOSE PERSONS WHO ARE PRESENT IN THE STATE OF OHIO PRIMARILY FOR THE PURPOSE OF RECEIVING THE BENEFIT OF A STATE-SUPPORTED EDUCATION.

## INSTRUCTIONS FOR COMPLETING THE APPLICATION FOR RESIDENT CLASSIFICATION FOR TUITION PURPOSES

Carefully read all instructions before completing the form. Complete and submit all parts of the application. This form is considered an official document, and any falsification or purposeful omission on this form could be cause for your removal from the University in accordance with Miami University's Code of Student Conduct.

**After you complete the application, you must have your signed application notarized on the last page of this form.** A notary is available at the Registrar's Service Center, 102 Campus Avenue Building. The Residency Officer must receive application materials and all required documentation by the following deadlines in order to be reviewed for the desired semester:

**Fall Semester: July 15**

**Spring Semester: December 15**

**Summer: April 15**

**TUITION:** You are expected to make full payment (including nonresident fees) by the appropriate payment due date. Payment deadlines cannot be waived or extended while your residency is being reviewed. Retroactive residency determinations cannot be made for tuition purposes.

## PART A

Type or legibly print all answers to questions 1 through 11. The numbers below correspond to appropriate items in PART A.

- 1.-6. Fill in the appropriate information and attach documentation.
7. Document your residence beginning one year preceding the date you began living in Ohio through the present.
8. Explain the reason why you moved to Ohio.
9. Explain and document all sources of your support. The minimum documentation required for common sources of income is listed below. Additional documentation may be requested. Submit all documents that apply to your case.
  - **Employment:** Photocopies of W-2 forms for the past year's earnings, most recent pay stubs for the current year (if they show your full name and year-to-date earnings), letter(s) from employer(s) on official letterhead stationery (or notarized) indicating the dates of your employment and your total earnings for the 12-month period of review, or payroll statements if they are readily identifiable.
  - **Savings:** If you have used savings that are in **your name** that you acquired prior to the 12-month period of review, you should list your savings balance as of the **start** of the 12-month period of review. For documentation, submit a copy of your bank statement from the start of your 12-month period of review. Documentation is required to verify all source(s) of your existing savings, or deposits to existing accounts.
  - **Scholarships and Grants:** List any scholarships and grants you received during the preceding 12-month period of review and **provide copies of your award letter(s)**. If you received the scholarship/grant from an out-of-state source, submit a copy of the application instructions or a letter from the grantor that verifies whether or not you were required to be a resident of a particular state to receive the funds.
  - **Loans:** If you have incurred loans directly in **your name** during the 12-month period of review, list the total amount of the loans. For documentation, **please provide copies of your award letters and disbursement dates**. If you received a loan from an out-of-state source, submit a copy of the application instructions or a letter from the lender that verifies whether or not you were required to be a resident of a particular state to receive the funds.
  - **Fee Payment Authorization:** List any fee authorizations/waivers received during the 12-month period of review. **Please provide a copy of your award letter.**
  - **Gifts or Support from Parents, Guardians, Relatives, or Friends:** If relatives or friends who reside in Ohio provided a portion of your financial support, submit a notarized letter from them indicating the dates they have resided in Ohio, the amount and type of financial support they have provided you during the 12-month period of review, and whether or not they are citizens or permanent residents of the United States. The letter should also include a statement verifying that the support came from the individual's own financial resources and not from an out-of-state individual. A similar statement should be provided from sources outside Ohio, including the person's state or country of legal residency.
  - **VA Benefits, Social Security Benefits:** If you have used Veterans Administration, Social Security, unemployment, or welfare benefits, those agencies must verify, in writing, the amount and type of support you received during the 12-month period of review.
  - **Other:** List and describe any other income sources used during the 12-month period of review. Please provide complete and appropriate documentation for the income source(s).
10. Indicate all persons who claimed you on their past year's federal income tax return(s). If you claimed yourself, write "self." If claimed by anyone else, indicate their place of residence/domicile and whether or not they will continue to claim you this coming year. **Students under 24 years of age must provide a copy of their parents' most recent federal income tax return, showing the dependent section.**
11. Fill in the total amounts of your income and expenses for the 12-month period immediately preceding the semester for which you are requesting reclassification. While completing Section 11, keep in mind that **documentation** must be submitted for **all sources** of financial support you received, used, or anticipate using or receiving during this 12-month period.

# A. APPLICATION FOR RESIDENT CLASSIFICATION FOR TUITION PURPOSES

## General information

**1** Semester for which you are requesting reclassification: \_\_\_\_\_  
 New Student  
 Currently Enrolled Student  
 Former Student – Last semester attended: \_\_\_\_\_

**2** Marital Status:  Single  Married \_\_\_\_\_  
 Number of Dependents (including self) \_\_\_\_\_ Month and Year \_\_\_\_\_

**3** Are you a citizen of the United States?  
 Yes  No If no, what type of visa do you hold? **Attach copy of visa.**  
 Permanent Resident Alien \_\_\_\_\_  
 Date and Alien Registration Number \_\_\_\_\_  
 Student Visa  
 Other (specify) \_\_\_\_\_

**4** In what state are you registered to vote? \_\_\_\_\_  
**Attach copy of voter registration card.**

**5** Have you filed an Ohio personal income tax statement for the past twelve months?  
 Yes, for year \_\_\_\_\_  No  
**Attach copy of most recent return.**

**6** Do you have a Driver's License? **Attach copy**  Yes  No  
 Is it from Ohio?  Yes  No  
 Do you own or have use of a car?  Yes  No  
 Is it titled in your name?  Yes  No  
 If not, who owns it? Name: \_\_\_\_\_  
 Relationship: \_\_\_\_\_ Owner's state of Residence: \_\_\_\_\_  
 Is car currently registered in Ohio?  Yes  No  
**Attach copy of vehicle registration.**  
 Do you have car insurance?  Yes  No  
 Is this your insurance policy? **Attach copy.**  Yes  No  
 If no, name/relation/state of person with insurance under which you are covered:  
 \_\_\_\_\_

**7 RESIDENCES:** In chronological order (listing present address first) indicate where you have lived beginning one year preceding the date you began living in Ohio through the present. **Attach documentation** showing you have lived in Ohio for the past 12 months (e.g. apartment lease, canceled rent checks, rent receipts, landlord's statement, settlement statement or deed).  
 Dates from \_\_\_\_\_ to present

Mo. Day Yr. Mo. Day Yr.

Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zipcode \_\_\_\_\_

Phone Number \_\_\_\_\_

Occupation \_\_\_\_\_

Student/Work (If work, give the name of your employer)

If Student  Full-time  Part-time  Paid Nonresident Fee

If Employed  Full-time  Part-time

Dates from \_\_\_\_\_ to \_\_\_\_\_  
 Mo. Day Yr. Mo. Day Yr.

Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zipcode \_\_\_\_\_

Occupation \_\_\_\_\_

Student/Work (If work, give the name of your employer)

If Student  Full-time  Part-time  Paid Nonresident Fee

If Employed  Full-time  Part-time

Dates from \_\_\_\_\_ to \_\_\_\_\_  
 Mo. Day Yr. Mo. Day Yr.

Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zipcode \_\_\_\_\_

Occupation \_\_\_\_\_

Student/Work (If work, give the name of your employer)

If Student  Full-time  Part-time  Paid Nonresident Fee

If Employed  Full-time  Part-time

**8 STATE WHY YOU MOVED TO OHIO:** \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**9 SOURCE OF SUPPORT:** Explain fully your sources of money received during the past 12 months (from employment, savings, loans, GI Bills, Social Security benefits, spouse, etc.) and fully document your sources; e.g. **attach copies** of contracts or awards, check stubs containing your name, statement from payroll officials, W-2 forms, etc. Attach additional pages as needed.

Source 1 \_\_\_\_\_

Dates from \_\_\_\_\_ to \_\_\_\_\_

Yours  Others \_\_\_\_\_

State \_\_\_\_\_ Amount \$ \_\_\_\_\_

Amount in past 12 months

Source 2 \_\_\_\_\_

Dates from \_\_\_\_\_ to \_\_\_\_\_

Yours  Others \_\_\_\_\_

State \_\_\_\_\_ Amount \$ \_\_\_\_\_

Amount in past 12 months

Source 3 \_\_\_\_\_

Dates from \_\_\_\_\_ to \_\_\_\_\_

Yours  Others \_\_\_\_\_

State \_\_\_\_\_ Amount \$ \_\_\_\_\_

Amount in past 12 months

**10** If you are not entirely self-supporting, who claimed you as an exemption on the past year's federal income tax return?  Self  Other

Name \_\_\_\_\_ Year \_\_\_\_\_

Relationship \_\_\_\_\_ Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_

**Attach photocopy** of page showing dependents on latest Federal Income Tax form. Also substantiate residency of person declaring you as an exemption by verifying he/she has lived in Ohio the past 12 months.

Will this person claim you on the next year's tax return?  Yes  No

**11** List all sources of income and expenditures for the 12-month period preceding the semester of enrollment you are applying for. **Fully document all income and expenditures by providing clear photocopies that will be included in your file.** If listing support in the parent/guardian or relatives/friends sections, document contributor's state of residence and length of time lived there. (Attach additional information as needed.)

INCOME	ANNUAL TOTAL	EXPENSES	ANNUAL TOTAL
Employment		Fees (Tuition)	
Spouse's Employment		Books/Supplies	
Scholarships		Food	
Grants		Rent/Housing	
Loans		Utilities	
Fee Waiver		Travel	
VA Benefits		Clothing	
Social Security		Laundry	
Parent/Guardian		Auto Payment	
State of Residence		Auto Insurance	
Length of time		Other Insurance	
Relatives/Friends		Credit Card(s)	
State of Residence			
Length of Time		Misc. (itemize)	
Others (itemize)		Others (itemize)	
<b>Total Annual Income</b>		<b>Total Annual Expenses</b>	

## B. SUMMARY OF THE OHIO BOARD OF REGENTS RESIDENCY REQUIREMENTS FOR TUITION PURPOSES

Name \_\_\_\_\_ Banner ID (or Social Security) Number \_\_\_\_\_  
Please Print Last First Middle/Maiden

As a state of Ohio assisted institution, Miami University is obligated to comply with the law established by the Ohio legislature and charged to the Ohio Board of Regents in regard to verifying residency status and assessing tuition costs for each student. The Residency Officer reviews a student's residency application in accordance with the *Ohio Student Residency Subsidy and Tuition Guidelines (Ohio Administrative Code, Section 3333.1.10. Website: <http://onlinedocs.andersonpublishing.com>)*. Information requested is necessary to satisfy state auditors upon their review of the applicant's file. Students classified as residents for tuition purposes receive the benefit of a state-supported education, funded largely by the taxpayers of Ohio. **The guidelines are therefore meant to exclude from residency those who are in Ohio primarily for the purpose of receiving a state-supported education.**

**CHECK (☑) THE BOX of the guideline for which you are requesting residency and attach the requisite documents. Include this summary form with your *Application for Resident Classification for Tuition Purposes*.** (Refer to the complete policy on Ohio Student Residency for State Subsidy and Tuition Purposes.) Your signature on the last page of this completed application must be notarized.

**(C-1) Dependent Student– (You are a student whose spouse, or are a dependent student, at least one of whose parent or legal guardian, has been a resident of Ohio for 12 consecutive months prior to the start of the semester for which you are applying for residency.)** If you meet the Ohio Board of Regents Guidelines as the dependent student of an Ohio resident under this rule, you should submit, in addition to the *Application for Resident Classification for Tuition Purposes* and other appropriate documentation, a **notarized letter** of support and appropriate documentation from your spouse or parent/legal guardian that contains the following information:

1. Your name, social security number and the amount and type of financial support they provided you during the 12-month period of review.
2. Number of years spouse or parent/legal guardian has lived in Ohio (copies of deeds or rental agreement(s) or lease(s) for the preceding 12 consecutive months).
3. Number of years spouse or parent/legal guardian has paid taxes in Ohio and include a copy of their most recent Ohio personal income tax return.
4. Whether or not at least one parent/legal guardian has claimed the student as a dependent for tax purposes (copy of most recent federal income tax return showing **dependent** section). For spouse, provide a copy of the marriage license.

**(C-2) Independent Student– (You are trying to become an Ohio resident and attend school full-time (parents live outside the state of Ohio.)** If you satisfy all of the following criteria you may be classified as a resident upon submission of the *Application for Resident Classification for Tuition Purposes* and the documentation indicated below. *Additional documentation may be required to provide evidence of the independent student status.*

1. You must be independent. **If you are claimed on your parent(s) or legal guardian's federal income tax return, you are a dependent and your residency is determined by their residency status. Students must provide a copy of their parent(s) most recent federal and state income tax return.**
2. You must live in Ohio for a full, 12 consecutive months immediately preceding the semester for which you are applying for residency. The expectation is that you should not be absent from the state any longer than winter break, spring break, and three weeks during the summer. You must have a lease, rent receipts, property settlement or deed, or other formal documentation that shows your permanent residence in Ohio.
3. You should demonstrate your intent to become an Ohio resident by transferring any applicable items of registration to Ohio, such as a driver's license, automobile registration, and voter registration **one year prior to the semester for which reclassification is desired.**
4. You must demonstrate that **during the preceding 12-month period of review while establishing residency, you are totally self-supporting with sufficient income derived from within the state of Ohio** and have subjected that income to Ohio taxation, to meet all expenses without the need of money from outside the State of Ohio. You **cannot** receive any financial support from outside the state of Ohio to assist with payment of tuition, books, room, board, insurance and other living expenses. **Financial Aid that requires you to be a resident of another state or parent PLUS loan money to parents who are not Ohio residents makes you ineligible under C-2 status.** Documentation of all your sources of income used during the 12-month period of review and your federal and Ohio tax returns are required.

**(C-3) Dependent Student (INSTANT RESIDENCY)– (You are the dependent student or spouse of a person who is living and employed on a full-time, self-sustaining basis in Ohio.)** An employed person who, as of the first day of a term of enrollment, has established domicile and accepted full-time self-sustaining employment in Ohio and their dependent spouse/children are eligible for instant residency. Graduate Assistantships are not considered as full-time employment. If you are applying for C-3 residency you must complete the *Application for Resident Classification for Tuition Purposes* and submit the following documents for review by the established deadline:

1. **A letter from the employed person's employer, on company letterhead that indicates:**
  - a. Name of the employed person, date his/her employment began, he/she is employed full-time, and base salary amount.
2. **Documentation that an Ohio domicile has been established by the parent, legal guardian or spouse:**
  - a. Copy of deed or property settlement verifying purchase of house in Ohio, or rental agreement or lease.
  - b. Copy of Ohio Driver's License(s)
  - c. Copy of Ohio vehicle registration(s)
  - d. Copy of Ohio voter registration (optional)
3. **One of the following to verify that you are dependent upon the full-time employed individual:**
  - a. If you are a dependent child, (Attach copies of your parents' or legal guardian's most recent federal income tax return, showing dependent section).
  - b. If you are dependent upon a spouse who is employed full-time, submit a copy of your marriage license/certificate.

**(E-1) CONDITIONAL RESIDENCY–(You are independent, living and gainfully employed on a full-time or part-time and self-sustaining basis in Ohio and pursuing a part-time program of instruction.)** You must be able to demonstrate that you are self-supporting based **solely on your current employment income.** In determining whether or not you qualify for Conditional Residency, financial aid, savings, or other sources of income (i.e. VA benefits, social security) **cannot** be considered as income contributing to your self-supporting status, but can be used over and above the amount necessary to meet expenses. Under Conditional Residency, you must be a part-time student. You are limited to 11 credit hours if you are an undergraduate student or 9 credit hours for a graduate student, or you will be billed as a non-resident for all hours. If you qualify as a Conditional Resident you should complete the *Application for Resident Classification for Tuition Purposes* and submit the following documents certifying your permanent residence in Ohio, including:

1. **One of the following to verify that you have established an Ohio domicile:**
  - a. A copy of a rental agreement/lease for the 12 consecutive months of review for an apartment/house, or a copy of the closing statement or deed verifying the purchase of a home.
2. **Notarized letter from employer on letterhead stating:**
  - a. Date your employment began, number of hours per week you work and your rate of pay per hour, week or year.
  - b. Copy of your most recent pay stub.

**(E-2) MILITARY EXCEPTION**— A person who enters and remains upon active duty status in the U.S. military while a resident of Ohio for all other legal purposes (and his or her dependents) shall be considered a resident of Ohio for tuition purposes as long as Ohio remains the state of that person's domicile. Complete the *Application for Resident Classification for Tuition Purposes* and submit **both** of the following:

1. Verification of Ohio Home of Record – acceptable documents include enlistment papers, DD214 (discharge papers), State of Legal Residency Form dated at least 12 months prior to intended enrollment, or a letter from the base personnel officer verifying your HOR.
2. Documentation verifying that Ohio income taxes have been paid during the 12-month period prior to enrollment – submit your most recent W-2 and/or most recent Leave and Earnings Statement (LES).

**(E-3) MILITARY EXCEPTION**— A person on active duty status in the United State military who is both stationed and residing in Ohio (and his or her dependents) shall be considered a resident of Ohio for tuition purposes. To apply, complete the *Application for Resident Classification for Tuition Purposes* and submit a copy of your current military orders verifying that you are stationed in Ohio. For dependent students under either type of military exception, complete the *Application for Resident Classification for Tuition Purposes* and submit the document(s) requested above and verification of your dependent status. For a dependent child, submit a letter from your parent that indicates whether or not you have been claimed as a dependent for tax purposes (copy of most recent federal income tax return, showing dependent section). For a dependent spouse, submit a copy of the marriage license/ certificate.

**(E-4)**— A person who is transferred by his or her employer beyond the territorial limits of the 50 states of the United States and the District of Columbia while a resident of Ohio for all other legal purposes and his or her dependents shall be considered residents of Ohio for these purposes as long as Ohio remains the state of such person's domicile as long as such person has fulfilled his or her tax liability to the state of Ohio for at least the tax year preceding enrollment. Complete the *Application for Resident Classification for Tuition Purposes* and submit it with the document(s) requested below:

1. A statement on employer's letterhead indicating the employee was an Ohio resident at the time of being transferred.
2. A copy of the employee's Ohio tax return for the previous tax year.
3. For a dependent child, submit a letter from your parent that indicates whether or not you have been claimed as a dependent for tax purposes (copy of most recent federal income tax return, showing dependent section). For a dependent spouse, submit a copy of your marriage license/certificate.

**(E-5)**— A person who has been employed as a migrant worker in the state of Ohio and his or her dependents shall be considered a resident for these purposes, provided such person has worked in Ohio at least four months during each of the three years preceding the proposed enrollment. Complete the *Application for Resident Classification for Tuition Purposes*. A **dependent student** must provide a letter from employer(s) verifying that your parent has worked in Ohio at least four months during each of the three previous years, Certificate of Eligibility from Ohio Migrant Education Center that certifies dates of employment or dependence (if necessary); or letter from Ohio Department of Jobs and Family Services Office of Migrant Services / Workforce Development, along with a copy of your parents' most recent federal income tax return, showing the dependent section. An **independent student** must provide a letter from employer(s) verifying you have worked in Ohio at least four months during each of the three previous years; Certificate of Eligibility from Ohio Migrant Education Center that certifies dates of employment or dependence (if necessary); or letter from Ohio Department of Jobs and Family Services Office of Migrant Services / Workforce Development.

**(E-6)**— A person who was considered a resident under this rule at the time the person started a community service position as defined under this rule, and his or her spouse and dependents, shall be considered as residents of Ohio while in service and upon completion of service in the community service position (VISTA, Americorps, City Year, Peace Corps) or working for an elected or appointed public official for a period of time not exceeding 24 consecutive months). Complete the *Application for Resident Classification for Tuition Purposes* and provide supporting documentation, which includes but is not limited to, an Ohio driver's license, your prior and current residence in Ohio and proof of community service.

**(E-7)**— A person who returns to the state of Ohio due to marital hardship, takes or has taken legal steps to end a marriage, and reestablishes financial dependence upon a parent or legal guardian (receives greater than 50% of his or her support from the parent or legal guardian), and his or her dependents shall be considered residents of Ohio. You should submit, in addition to the *Application for Resident Classification for Tuition Purposes* and other supporting documentation, a notarized letter of support and appropriate documentation from your parent or legal guardian that contains the following information:

1. Your name, social security number and the amount and type of financial support they provide you.
2. Number of years parent or legal guardian has lived in Ohio (copies of deeds or rental agreement(s) or lease(s) for the preceding 12 consecutive months).
3. Number of years that parent/legal guardian has paid taxes in Ohio and include a copy of their most recent Ohio personal income tax return.

**(E-8)**— A person who is a member of the Ohio National Guard and who is domiciled in Ohio, and his or her spouse and dependents, shall be considered residents of Ohio while the person is in Ohio National Guard service. To apply, complete the *Application for Resident Classification for Tuition Purposes*, submit a copy of your enlistment papers and documentation of your domicile in Ohio (copy of deed, rental agreement or lease). For a dependent child, submit a copy of your most recent federal income tax return, showing dependent section. For a dependent spouse, submit a copy of your marriage license/certificate.

**INTERNATIONAL STUDENTS**— Students who are U.S. citizens, Permanent Resident Aliens, Political Asylees or Political Refugees, or students who hold an A, E, G, H, I, L, O, P, R, TC, TD or TN visa **may apply to be reviewed** for in-state residency according to the guidelines above. International Students **who hold B, F, J, K or M visas are NOT eligible for establishing in-state residency, unless they are financially dependent upon a spouse or parent who is a bona fide Ohio resident.** This is defined as a person who meets the criteria established in the Ohio Board of Regent's Guidelines and is also a U.S. citizen, Permanent Resident Alien, Political Asylee, Political Refugee, or holds an A, E, G, H, I, L, O, P, R, TC, TD or TN visa. Students whose immigration status is pending are eligible to establish Ohio residency only if their most recent immigration status was eligible to establish Ohio residency. "Financially dependent on a parent" is defined as having been claimed for tax purposes since birth.

**C. ADDITIONAL COMMENTS AND OATH**

**APPLICANT'S ADDITIONAL COMMENTS**

**OATH**

Do not sign this statement until you are directed to do so by the Notary.  
A notary is available in the Registrar's Service Center.

I, \_\_\_\_\_, the undersigned, being duly sworn, deposes and says that the foregoing statements and all accompanying documents are true, correct and complete. I understand that any falsification or purposeful omission on this form could be cause for my removal from the University in accordance with Miami University's Code of Student Conduct.

Signature of Student \_\_\_\_\_ Date \_\_\_\_\_

Subscribed and sworn to before me this \_\_\_\_\_ day of

\_\_\_\_\_, \_\_\_\_\_

Notarized by \_\_\_\_\_

County \_\_\_\_\_ State \_\_\_\_\_

My Commission Expires \_\_\_\_\_

**DISPOSITION**

On the \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_,  
I the undersigned party reviewed and considered the affidavits and documentation presented. I find that the appeal should be  
Granted \_\_\_\_\_ Denied \_\_\_\_\_ based on the following rule and reasons set forth below:

If approved: Date \_\_\_\_\_, \_\_\_\_\_ Effective Term: \_\_\_\_\_