

**ULSTER COUNTY
APPLICATION AND AFFIDAVIT (OR AFFIRMATION)
FOR CERTIFICATE OF RESIDENCE**

(1) NAME: _____ (2) DATE OF BIRTH: _____

(3) RESIDE AT: _____
City/Town _____ State _____ Zip Code _____

(5) MAILING ADDRESS: _____

If Different from Residential Address

(6) HOW LONG HAVE YOU LIVED AT THE ABOVE ADDRESS? From: _____ to _____
Month/Year _____ Month/Year _____

(7) TOWN IN WHICH PROPERTY TAX BILL IS PAID: _____

(8) PREVIOUS ADDRESSES: (If you have lived at the residential address above less than one year.)

Street _____ City _____ State _____ From _____ to _____
Month/Year _____ Month/Year _____

Street _____ City _____ State _____ From _____ to _____
Month/Year _____ Month/Year _____

CITIZENSHIP: United States Citizen: (9) Yes _____ (9) No _____

For non-citizens: Alien Registration Receipt Card (10) #: _____ Date Card Issued: _____

AFFIDAVIT (OR AFFIRMATION)

(11) I, _____, do hereby swear (or affirm) that I reside at (12) _____

In the (City)(Village)(Town) of (13) _____, County of (14) _____, State of New York; that I now am and have for a period of at least one year immediately prior to the date of this application and affidavit (or affirmation), been a resident of the State of New York; that I now am, or have been for a period of (15) _____ months within the six months immediately prior to the date of this application and affidavit (or affirmation) a resident of the County of Ulster; and that I have lived at the above-listed places during the year immediately prior to the date of this application and affidavit (or affirmation).

I further state that I plan to enroll in (16) _____ (College or Institute) and that this application and affidavit (or affirmation) is made for the purpose of securing from the Chief Fiscal Officer of the County of Ulster a certificate of residence pursuant to the requirements of Article 126 of the Education Law.

(17) ARE YOU/YOUR SPOUSE OR PARENT/GUARDIAN ELIGIBLE FOR VETERANS BENEFITS: Yes _____ No _____
OR

ARE YOU (AS REFERENCED ABOVE) DISCHARGED FROM THE MILITARY ON ANY OTHER CONDITION
(OTHER THAN DISHONORABLY) WITHIN THE LAST 5 YEARS. Yes _____ No _____

(18)

(19)

SEMESTER/YEAR: Fall _____ / _____ Winter Interim _____ / _____

Applicant's Signature

Must be signed in the presence of a Notary Public
or Ulster County Dept of Finance Employee

Spring _____ / _____ Summer _____ / _____

Sworn to (or affirmed) before me this
day of _____ 20 _____

Certificate Issued () Certificate Not Issued ()
Number of Months _____

Date: _____ By _____

Notary Public

Education Law, Section 6305 provides, "The Chief Fiscal Officer of each county, as defined in section 2.00 of the local finance law, shall, upon application and submission to him of satisfactory evidence, issue to any person desiring to enroll in a community college as a non-resident student, a certificate of residence showing that said person is a resident of said county... Such person shall, upon his registration for each college year, file with the college such a certificate of residence issued not earlier than 60 days prior thereto or up to 30 days after the start of the semester, and such certificate of residence shall be valid for a period of one year from the date of issuance. Education Law, Section 6301, paragraph 4 defines "Resident" A person who has resided in this state for a period of at least one year and in the county, city, town, intermediate school district or school district, as the case may be, for a period of at least 6 months both immediately preceding the date of such person's registration in a community college or, for the purposes of section 6305 of this chapter, his/her application for a certificate of residence. According to Article 126 of Education Law, Section 6301 paragraphs 5, 5(i), 5(ii) and 5(iii) 1 & 2, "In the event that a person qualified for state residence but has been a resident of two or more counties in the state during the six months immediately preceding his application for a certificate of residence, the charges to the counties of residence shall be allocated among the several counties proportional to the number of months, or major fraction thereof, of residence in each county."

OFFICE USE ONLY	
<input type="checkbox"/>	NYS LICENSE
ISSUE DATE: _____	
<input type="checkbox"/>	RPS
<input type="checkbox"/>	VOTER REG
<input type="checkbox"/>	MAIL
<input type="checkbox"/>	_____
<input type="checkbox"/>	_____