Dear student,

HESC (TAP) is now requesting that you file a New York State Residency Review Questionnaire to determine if you will be eligible for a TAP award for the Fall 2020 and/or Spring 2021 semester(s).

Included with this message, is the New York State Residency Review Questionnaire. Be sure to list the last 5 years of your addresses.

The questionnaire must be filled out completely, signed and sent via email & certified mailed to HESC (TAP) along with the following:

1. Copy of student’s NYS driver’s license, NYS ID or voter registration card.
2. Copies of parent’s old & recent utility bills (gas, electric or cable bills), credit card bills, bank statements from the date the student moved to NYS.
3. Copy of proof of student’s citizenship.
4. A copy of student’s High School Diploma if graduated from NYS High School or a copy of student’s High School transcript.

Submit the questionnaire and all required documentation to HESC via certified mail AND via email to the addresses below:

Email: tapprocessing@hesc.ny.gov

Certified Mail (be sure to secure your tracking #):

NYSHEC
99 Washington Avenue
Albany, New York 12255

Attn: Residency Review Unit

Please note: it may take HESC approximately 6 – 12 weeks to review the questionnaire upon receipt of documentation.

Respectfully,
Rose O’Neill, Tap Officer
John Jay College of Criminal Justice
New York State Residence Review Questionnaire

Enter Academic Year __________________________

Do not leave any questions blank. No decision can be made unless all 15 questions are completed and required documentation is submitted. Please fill in all dates using the mm-yyyy format (e.g. 09-2008). Mail to: NYS Higher Education Services Corporation, Residency Review Unit, 99 Washington Ave., Albany, NY 12255.

1. Name (Last, First, MI) SSN

2. For what continuous period are you claiming legal residence in New York State? If period of residence is not continuous, list each separate period of residence.

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3. Beginning with your current address, list all your addresses for the last five years. Provide all information for each address. Enter the corresponding code under Living Status:

- 1 Live with Parents
- 2 Rent/Lease
- 3 Purchased
- 4 Live with Relatives
- 5 Military Housing
- 6 College Housing/Dorms
- 7 Other

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<tr>
<th>From</th>
<th>To</th>
<th>Street, City and State</th>
<th>Living Status (Enter appropriate number)</th>
<th>Reason for move</th>
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4. Last high school attended __________________________ City __________________________ State __________ Date ______

5. List all colleges attended, beginning with the most recent. Provide all information for each college.
If none, check box: 

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<th>From</th>
<th>To</th>
<th>College Name</th>
<th>City and State</th>
<th>Full-time</th>
<th>Part-time</th>
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6. List your employment or activities other than college attendance. Begin with your current employment.
If none, check box: 

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<th>Employer or other activity</th>
<th>City and State</th>
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7. Have you filed a NYS Resident Income Tax Return? If yes, list last 5 years filed.

- Yes □  No □

If no, explain why. ________________________________________

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### 8. Are you currently receiving student financial assistance (e.g. tuition reduction, student loans) based on your residence in a state other than New York?
- [ ] Yes
- [ ] No

If Yes, indicate issuing state and date:
- State: ____________________________
- Date: ____________________________

### 9. Are you a non-citizen who has come to the United States within the past five years?
- [ ] Yes
- [ ] No

If Yes, give location and date of entry into the U.S., and your current immigration status:
- City: ____________________________
- State: _____
- Date: __________
- Current Status: (Check box)
  - 1. Permanent Resident
  - 2. Refugee
  - 3. Asylum granted
  - 4. Other

### 10. For military personnel, their spouses and dependents only.

a) Are you or your spouse currently on active duty in the military?
- [ ] Yes
- [ ] No

If Yes, give duty station and home of record:
- Base: ____________________________
- City: ____________________________
- State: _____

b) Is your parent currently on active duty in the military?
- [ ] Yes
- [ ] No

If Yes, give duty station and home of record:
- Base: ____________________________
- City: ____________________________
- State: _____

### 11. Do you have a valid driver's license?
- [ ] Yes
- [ ] No

If Yes, indicate state and date of issuance:
- State: ____________________________
- Date: ____________________________

Previous driver's license:
- State: ____________________________
- Date: ____________________________

### 12. Do you own a motor vehicle?
- [ ] Yes
- [ ] No

If Yes, indicate state and date of registration:
- State: ____________________________
- Date: ____________________________

### 13. Have you ever registered to vote?
- [ ] Yes
- [ ] No

If Yes, list state and date for your last two registrations:
- State: ____________________________
- Date: ____________________________
- State: ____________________________
- Date: ____________________________

### 14. Are you currently receiving public assistance or unemployment benefits?
- [ ] Yes
- [ ] No

If Yes, indicate issuing state, date received and type of assistance:
- State: _____
- Date: _____
- Type of Assistance: __________
- State: _____
- Date: _____
- Type of Assistance: __________

### 15. Were you claimed as a dependent for tax purposes in the last 2 years?
- [ ] Yes
- [ ] No

If Yes, indicate tax year(s), claimant's name, relationship and state of residence:
- Year: ______
- Name: ____________________________
- Relationship: (Enter Code) ______
- State: _____

- Year: ______
- Name: ____________________________
- Relationship: (Enter Code) ______
- State: _____

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I affirm that the evidence and information herein and submitted herewith is true and that this information will be for all purposes the equivalent of an affidavit, and if it contains a false statement, shall subject me to the same penalties for perjury as if I had been duly sworn.

Signature: ____________________________
Date: __________

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H8737B (09/2008)