HOLYOKE
COMMUNITY
COLLEGE

www.hcc.edu

303 Homestead Avenue
Holyoke, MA 01040
413.538.7000

TUITION CLASSIFICATION

For the purpose of assessing tuition and fees, each student shall be classified as a "Massachusetts resident" or a "Non-Massachusetts resident." At Holyoke Community College, a resident is defined as a U.S. citizen, lawful immigrant, permanent resident, or holder of another legal immigration status who has lived in Massachusetts for at least six (6) continuous months prior to the first day of the semester for which they apply with intent to continue living in Massachusetts indefinitely. The provisions of this policy also apply to the classification of a student as a resident of any New England state for purposes of assessing tuition benefits through the New England Board of Higher Education's Regional Student Program (NERSP).

Your tuition classification is noted on your acceptance letter. If you feel your tuition classification is incorrect, or if the factual basis for your classification as a non-resident has changed, you may request a reclassification, or change of residency. To do so, complete the back side of this form and submit all supporting documentations to:

<div align="center">

Holyoke Community College
Admissions Office, Campus Center 148
303 Homestead Ave
Holyoke, MA 01040

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All deadlines for the payment of tuition, fees, and other financial obligations to the college remain in force during the pendency of any request for reclassification or appeal. Any change in your tuition classification as the result of this request for reclassification or an appeal will be retroactive only to the beginning of the semester during which the college makes the final decision on tuition classification. Misrepresentation in or omission from any evidence submitted with respect to any fact which, if correctly or completely stated, would be grounds to deny classification as a Massachusetts resident, shall be cause for disciplinary action, including assessment of non-resident tuition, fees, collection costs, and all associated legal expenses.

Applicant Information
Massachusetts Public Higher Education Institutions In-state tuition eligibility form

First name:	Last name:	
Street Address:		
City:	State:	Zip:
HCC Student ID #:	Date of Birth:	

Citizenship: ____U.S. Citizen ____ Permanent Resident ____ Other:_____

☐ I have lived in Massachusetts continuously since: _____/_____ and I intend to remain here:
<p style="text-align:center">Month / Year</p>

As proof of my intent to remain in Massachusetts, I possess **at least 2** of the following documents which are attached. These documents are dated within six (6) months of the start date of the academic semester for which I seek to enroll (except possibly for my high school diploma). The institution reserves the right to make any additional inquiries regarding the applicant's status and to require submission of any additional documentation it deems necessary.

Please check-off those documents you possess as proof of your intent to remain in Massachusetts.

____ Driver's license   ____ MA High School Diploma   ____ Employment pay stub

____ Car registration   ____ Voter registration   ____ State/Federal tax returns
____ Utility bills   ____ Signed lease or rent receipt   ____ Military home of record

____ MA ID   ____ Other_____
____ Record of parents' residency for unemancipated person

____ I am an eligible participant in the New England Board of Higher Education's Regional Student Program. (Matriculated students in certain eligible programs only)

____ I am a member of the armed forces (or spouse or unemancipated child) on active duty in Massachusetts.

Certification of Information

I certify that this information is true and accurate. I understand that any misrepresentation, omission, or incorrect information shall be cause for disciplinary action up to dismissal, with no right of appeal or to a tuition refund.

Applicant signature: _____Date: _____

Parent/Guardian signature (if applicant under 18):_____Date: _____

OFFICIAL OFFICE USE ONLY – DO NOT WRITE IN THIS BOX

I have reviewed the above information in order to determine this individual's eligibility to receive the in-state tuition rate. Based on my review, I have determined the following:

☐ IS eligible for in-state tuition rate   ☐ IS NOT eligible for in-state tuition rate   ☐ I am unable to determine at this time.

Additional information has been requested from the applicant:_____

Effective Term: _____

Authorized college personnel: _____

Sent notification to student: DATE: _____