

Return form to: Office of Student Accounts
University at Buffalo
232 Capen Hall
Buffalo, NY 14260
Phone: 716-645-1800 Fax: 716-645-7771
Email: UBstudentaccounts@buffalo.edu

Section A- Personal Information			
Semester applying for:	<input type="text"/>	UB Email:	<input type="text"/>
Last Name:	<input type="text"/>	First Name:	<input type="text"/>
		Middle Initial:	<input type="text"/>
Date of Birth:	<input type="text"/>	Age:	<input type="text"/>
		Person Number:	<input type="text"/>
Citizenship:	US Citizen <input type="checkbox"/>	Other: <input type="checkbox"/>	If Other, list Visa Type: <input type="text"/>
If you are a US Permanent Resident, list your Alien Registration Number:		<input type="text"/>	Date Issued: <input type="text"/>

Section B- Military/Active Duty	
Are you, your parent or spouse a member of the US Armed Forces on Full Time Active Duty? Yes <input type="checkbox"/> No: <input type="checkbox"/>	
Is the Permanent Duty Station in New York State? Yes <input type="checkbox"/> No: <input type="checkbox"/>	
If Yes to both questions, continue to Section C and provide required documents. If No to both questions, continue to Section D and provide required documents.	

Section C- Required Documents for Military/Active Duty		
<u>Clear copies of document must be enclosed with application</u>	Where applicant for in-state status is the Spouse	Where applicant for in-state status is the Dependent Child
Armed Forces Member- Home of Record or Military Orders	X	X
Armed Forces Member Driver's License	X	X
Driver's License of Applicant	X	X
Marriage Certificate	X	
Birth Certificate		X

Section D: Required Documents for Veteran/Dependent of a Veteran

If you are an honorably discharged veteran, spouse or dependent of a veteran, please provide copies of the documents listed below.

Veteran/Dependent of Veteran (honorably discharged)

<u>Clear copies of document must be enclosed with application</u>	Where applicant for in-state status is the Veteran	Where applicant for in-state status is the Spouse or Dependent Child
Driver's License of Applicant	X	X
Veterans DD Form 214*	X	X
Dependent's Birth Certificate		X
Parent's/Spouse's Driver's License		X
Marriage Certificate		X

*If the honorably discharged veteran is receiving benefits, please provide documentation (i.e.. Certificate of Eligibility, DD214)