

# Academic Common Market or Contract Spaces Application

## Instruction Sheet

Kentucky Council on Postsecondary Education

### PROCESS

#### Step 1 » Download this document.

Save this document to your computer and complete the application. Make sure to save as you go.

You will need the latest version of Adobe Acrobat to fill out the form: <https://get.adobe.com/reader/>.

#### Step 2 » Assemble your supporting documentation.

You can submit the following electronically, by fax or by postal mail.

- Copy of Form 740 Kentucky individual tax return (yours or that of your parent/guardian)
- Copy of your driver's license
- *If you are applying to qualify for Academic Common Market*  
Copy of your official admission letter showing the specific ACM program or major.
- *If you are in the Armed Forces*  
Copy of your orders showing residence or station in Kentucky.
- *If you are not a U.S. citizen*  
Proof you are a political refugee, and copies of your visa and passport.

#### Step 3 » Submit your documents.

Submit your application and documentation to the ACM Coordinator. Allow two to three weeks for review; responses will come via email from the "CPE Custhelp" account.

#### CONTACT

**Email:** <http://cpe.custhelp.com/>.

**Fax:** 502-573-1535

**Postal mail:** ATTN: ACM Coordinator, 1024 Capital Center Drive, Suite 320, Frankfort, KY 40601

# Academic Common Market or Contract Spaces Application

## Kentucky Council on Postsecondary Education

Under the Family Educational Rights and Privacy Act (FERPA), your information will be kept confidential except for any email addresses you wish to be included in your correspondence.

### CONTACT INFORMATION

Name		Last 4 digits of SSN	
Permanent address		Present address	
City, State, Zip code	County	City, State, Zip code	County
Email address	Home phone number	Work phone number	
Email addresses of others you wish to be copied on email communications			

### PROGRAM AND ENROLLMENT

<i>If applying for Academic Common Market -</i>		<i>If applying for Contract Spaces -</i>	
Semester/year for application		Semester/year for application	
Institution		Optometry school	
City, State		Veterinary school	
Major			
Type of program	Degree code		

### PRIOR EDUCATION

High school or GED®		City, State	Graduation/GED® mo./yr.	
College (1)		City, State	Start mo./yr.	End mo./yr.
Status	Tuition Type			
College (2)		City, State	Start mo./yr.	End mo./yr.
Status	Tuition Type			

## RESIDENCY STATUS

Basis of your application for residency status.

If you have previously filed an application for determination of Kentucky residency status, please indicate which term:

What is your primary reason for living in Kentucky at this time?

What family do you have presently living in Kentucky?

Have you lived in Kentucky while enrolled in six or fewer college credit hours within a year prior to the term for which you are applying?

Yes      No

Please list the places where you have lived for at least the past five years, beginning with the most recent address.

Address (1)	City, State	Start mo./yr.	End mo./yr.
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Address (2)	City, State	Start mo./yr.	End mo./yr.
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Address (3)	City, State	Start mo./yr.	End mo./yr.
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Address (4)	City, State	Start mo./yr.	End mo./yr.
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## DEPENDENT/INDEPENDENT STATUS

### ***If someone has claimed you as a dependent --***

Applicable taxes      Year (before current tax year)

Federal      State

Name of filer      Relationship

Can someone claim you as a dependent on the current tax year?

Yes      No

Name of filer      Relationship

### ***If you have filed as independent --***

Applicable taxes      Year (before current tax year)

Federal      State

Last yr. filed as a dependent on federal      Last yr. filed as a dependent on state

Can someone claim you as a dependent on the current tax year?

Yes      No

Name of filer      Relationship

## ARMED FORCES STATUS

***If you are now or have been in the military, please fill out the information below.***

Induction date mo./yr.      Active service beginning mo./yr.      Active service ending mo./yr.      Discharge mo./yr.

State where inducted      Beginning service spent in Ky. mo./yr.      Ending service spent in Ky. mo./yr.

Did you maintain, or are you maintaining, Kentucky as your legal residence while in the service?

No      Yes, and I am currently stationed in

## VOTER STATUS

Current voter status

Status prior to current status

## DRIVER'S LICENSE STATUS

***If you operate a motor vehicle, please fill out the information below.***

Driver's license number

State issuing driver's license

License plate number

State issuing registration

Vehicle registrant/owner

## EMPLOYMENT STATUS

Current status

Please list your employers for the past five years, beginning with the most recent.

Employer (1)	City/State	Type	Start mo./yr.	End mo./yr.
Employer (2)	City/State	Type	Start mo./yr.	End mo./yr.
Employer (3)	City/State	Type	Start mo./yr.	End mo./yr.
Employer (4)	City/State	Type	Start mo./yr.	End mo./yr.

## CITIZEN STATUS

***If you are not a citizen of the United States, please provide the information below.***

Country of citizenship

Are you a political refugee?

Yes No

Passport status

If you have a visa, please provide the information below.

Visa type

Visa card number

Date issued mo./yr.

Expiration date

## SUPPORTING INFORMATION FOR DEPENDENT STATUS ONLY

***If you filed as a dependent, please provide information about your parents or legal guardian.***

Name (1)	Relationship
	Mother      Father      Legal guardian
Permanent address	Mailing address (if different from permanent address)
Home phone number	Number of years in Kentucky      Visa type (if not a U.S. citizen)

Name (2)	Relationship
	Mother      Father      Legal guardian
Permanent address	Mailing address (if different from permanent address)
Home phone number	Number of years in Kentucky      Visa type (if not a U.S. citizen)

***Please provide the information below if your parent(s) or legal guardian has been in the military.***

Relatives in the military

Mother	Father	Legal guardian		
Induction date	Active service start date mo./yr.	Active service end date mo./yr.	Discharge date mo./yr.	
State where inducted	Did this person maintain, or is this person maintaining, Kentucky as their legal residence while in the service?			
	No	Yes, and he/she is currently stationed in		

## COMMENTS

***Please describe other factors pertinent to your domicile and residency status, if needed.***

## SIGNATURE

Please check the box below.

By checking this box, I am signing this application electronically. I agree that my electronic signature is the legal equivalent of my manual signature on this application. I certify that the information provided in this application and all supporting documents are correct and complete to the best of my knowledge. I understand that residency determinations are made in accordance with 13 KAR 2:045 and that the Kentucky Council on Postsecondary Education reserves the right to request any additional information in order to assist in making those determinations. Failure to provide requested information may result in an automatic determination of non-resident status.

## Checklist for submissions

Please check the items you will be supplying.

- Copy of Form 740 Kentucky individual tax return (yours or that of your parent/guardian)
- Copy of your driver's license

*If you are applying to qualify for Academic Common Market*

- Copy of your official admission letter showing the specific ACM program or major.

*If you are in the Armed Forces*

- Copy of your orders showing residence or station in Kentucky.

*If you are not a U.S. citizen*

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