

DETERMINATION OF RESIDENCY STATUS FOR TAX WITHHOLDING:

<p>SUBSTANTIAL PRESENCE TEST (SPT) If "TOTAL" is less than 183, you are NRA for tax purposes. If "TOTAL" is more than or equal to 183, <u>and</u> you have been in the US 31 days in this CY, you a Resident Alien for Tax Purposes.</p>	CALCULATE THE NUMBER OF DAYS PHYSICALLY PRESENT IN THE U.S. DURING THE YEARS LISTED.			
		List calendar year	Number of days physically Present in the U.S.	Computation for the Test
	Current year	_____	_____	x 1 = _____
	Last year	_____	_____	x 1/3 = _____
	2 years ago	_____	_____	x 1/6 = _____
			TOTAL	

Certification to be completed by the individual:
 I certify that to the best of my knowledge, all of the information I have provided is true, correct, and complete.
 I understand that if my status changes from that which I have indicated on this form, I must submit a new Citizenship Status Form to the Payroll Department.

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Signature _____ **SSN or SID** _____ **UID** _____ **Date** _____

THIS SECTION MUST BE COMPLETED BY THE DEPARTMENT REPRESENTATIVE.

PURPOSE FOR SUBMITTING THIS FORM. (CHECK ONE):		Department Information:
<input type="checkbox"/> YEARLY RENEWAL		Department: _____
<input type="checkbox"/> Changing to valid SSN		Contact person (print name): _____
<input type="checkbox"/> New to the University		Phone number of contact person: _____
<input type="checkbox"/> Changing Immigration Status		Notes: _____
<input type="checkbox"/> Other:		_____

I hereby certify that I have reviewed this CSF, the copies of supporting documents, and the required tax forms for completeness & accuracy.

Signature ↑ _____ **Date** ↑ _____