

APPLICATION FOR IN-STATE TUITION RATES

This form must be completed if you are claiming entitlement to Virginia in-state tuition rates pursuant to section 23-77.4, Code of Virginia. Supporting documents and additional information may be requested. NOTE: Answers to the questions must reflect information that is true for at least ONE YEAR PRIOR to the term in which you will enroll. Please print.

Section A: Student Information

Name: _____
Last First VISA Type Parent VISA Type

1. Where have you lived for the last two years? List current address first. Include dates.

| From (mo./yr.) | To (mo./yr.) | Street Address | City | State | Zip |
|----------------|--------------|----------------|------|-------|-----|
| | | | | | |
| | | | | | |

2. Do your parents/legal guardian provide 50% or more of your financial support or claim you as a dependent? Yes No

3. A. If you are married, do you wish to claim eligibility for in-state tuition rates based on your spouse's domicile? Yes No

B. If "Yes," does your spouse provide over 50% of your financial support? Yes No

4. Do any of the following characteristics apply to you? Place a check mark beside all that apply.

- Age 24 or older as of the first day of the term in which you intend to enroll
- Veteran or active duty member of the U.S. Armed Forces
- Graduate or first-professional student
- Ward of the court or was a ward of the court until age 18
- If both parents are deceased, no adoptive or legal guardian
- Legal dependents other than a spouse

DIRECTIONS FOR COMPLETING THE REMAINDER OF THIS FORM:

If your response to question #2 or #3B is "Yes," complete both the shaded and unshaded areas of this form.

If your response to question #3B is "No," complete the unshaded areas of this form.

If you did not check any of the items in question #4, complete both the shaded and unshaded areas of this form.

If you checked any of the items in question #4 and answered "No" to question #2, complete only the unshaded areas of this form.

Section B: Domicile Information

5. Are you completing the shaded areas for your (check only one):
 Father Mother Legal guardian Spouse

Note: For questions 6-10, you must answer the "B" question if your response to the "A" question is "No."

6. A. Have you been employed in Virginia for the past year? Yes No

B. If "No," were you employed in: Student Parent, Spouse or Guardian

Student: Another state: _____ Not employed: _____

Parent: Another state: _____ Not employed: _____

7.A. Was a tax return filed or income taxes paid to Virginia as a full- or part-year resident on all earned income last year? Yes No

B. If "No," were taxes paid to: Student Parent, Spouse or Guardian

Student: Another state: _____ Didn't file: _____

Parent: Another state: _____ Didn't file: _____

8.A. Are you a registered voter in Virginia? Yes No

B. If "No," are you registered in: Student Parent, Spouse or Guardian

Student: Another state: _____ Not registered: _____

Parent: Another state: _____ Not registered: _____

9. A. Do you hold a valid Virginia driver's license? Yes No

B. If "No," do you hold a license in: Student Parent, Spouse or Guardian

Student: Another state: _____ Not licensed: _____

Parent: Another state: _____ Not licensed: _____

10. A. Did you operate a motor vehicle registered in Virginia during the last year? Yes No

B. If "No," is it registered in: Student Parent, Spouse or Guardian

Student: Another state: _____ Not registered: _____

Parent: Another state: _____ Not registered: _____

11. A. Are you a member of the U.S. Armed Forces? Yes No
 If "No," go to #12

B. Have income taxes been paid to Virginia on all military income for the last year? Yes No
 If "No," have income taxes been paid to another state? Yes No

C. Does the current Leave/Earnings Statement reflect Virginia withholding? Yes No
 If "Yes," please provide copy.

12. A. Is your parent/legal guardian or spouse a member of the U.S. Armed Forces? Yes No
 If "No," go to #15.

B. Have income taxes been paid to Virginia on all military income for the last year? Yes No
 If "No," have income taxes been paid to another state? Yes No

C. Does the current Leave/Earnings Statement reflect Virginia withholding? Yes No
 If "Yes," please provide copy.

Section C: Additional Information

13. If your spouse is in the military, will you have:
 A. Resided in Virginia for the past year? Yes No

B. Been employed and earned at least \$10,300 during the past year? Yes No

C. Paid income taxes to Virginia on all earned income? Yes No

14. If your parent/legal guardian is in the military, will the nonmilitary parent/legal guardian have:

A. Resided in Virginia for the past year? Yes No

B. Been employed and earned at least \$10,300 during the past year? Yes No

C. Paid income taxes on all earned income? Yes No

D. Claimed you as a dependent for federal and Virginia income tax purposes? Yes No

15. If you have lived outside Virginia for the past year, will you have:

A. Been employed in Virginia and earned at least \$10,300 during the past year? Yes No

B. Paid Virginia income taxes on all taxable income earned in Virginia during the past year? Yes No

16. If your parent/legal guardian has lived outside Virginia for the past year, will the parent/guardian have:

A. Been employed in Virginia and earned at least \$10,300 during the past year? Yes No

B. Paid Virginia income taxes on all taxable income earned in Virginia during the past year? Yes No

C. Claimed you as a dependent for federal and Virginia income tax purposes? Yes No

Section D: Parent/Legal Guardian or Spouse Information

17. Where have you lived for the last two years? (List current address first. Include dates)

| Street Address | City | State | Zip | From | To |
|----------------|-------|-------|-------|-------|-------|
| _____ | _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ | _____ |

Section E: Certification and Signature(s)

I certify that all of the information I provided in this application is true and accurate. I understand that this application is a legally binding document and that if I provide fraudulent information, I may be subject to repayment of tuition or dismissal. I agree to furnish the college with supporting documentation related to my application, if I am requested to do so.

Signature of Applicant _____ Social Security Number _____ Date _____

Signature of Parent/Legal Guardian or Spouse _____ Date _____