

APPLICATION FOR VIRGINIA'S IN-STATE TUITION PRIVILEGES

Completion of this form is required to claim in-state tuition privileges pursuant to section 23-7.4 of the code of Virginia. All questions must be answered. Failure to complete this form will result in an out-of-state classification for tuition purposes. Supporting documents and additional information may be required. Section I must be completed by the applicant. Section II must be completed by a parent, legal guardian, or spouse if the applicant is under the age of 24 on the first day of classes and/or if the applicant receives financial support or is claimed as a dependent for tax purposes, regardless of age, even if the applicant does not reside with them.

SECTION I (to be completed by all applicants.) First	Middle	S INFORMATION (please print.) Last		
Social Security Number (last 4 digits only)	Birth Date (M/D)			
How Long Have You Lived in Virginia?	Years	Months		
□ NON U.S. CITIZEN Visa Type		oth front and back of Form I-551/Green Card.) _ Date of Issuance Date of Expiration		
(Please inclu	de copy of Visa)			
WHERE HAVE YOU LIVED FOR THE PAST TWO YEAR Current Address	RS? (List current add City/State	ress first - physical address, not P.O. Box.) Zip Code		
From (Month/Year)	To (Month/Year))		
Previous Address	City/State	Zip Code		
From (Month/Year)	To (Month/Year))		
WHERE HAVE YOU WORKED FOR THE PAST YEAR?				
Current Employer	Street Address	City/State		
From (Month/Year)	To (Month/Year)	Hrs Per Week		
Previous Employer	Street Address	City/State		
From (Month/Year)	To (Month/Year)	Hrs Per Week		
PLACE A CHECK MARK BESIDE ANY THAT APPLY TO Veteran or active duty member of U.S. Armed Force Married Have legal dependents other than a Both parents deceased, no adoptive legal guardian Ward of the court until the age of 18 (court documentation required) If you checked any of the items, please complete the resection I, skip Section II, and sign at the end of the forn check any of these, your parent or guardian, should corand you both must sign at the end of the form. Do your parents, spouse, or legal guardian provide myour financial support? Do your parents, spouse, or legal guardian claim you for tax purposes? (If yes to either question above, Section II must be comparent, spouse, or legal guardian.) If you are married, do you want to claim eligibility foon your spouse's domicile? (If yes to the question above, Section II must be compspouse.) Will you have filed a tax return or paid income taxes	es spouse mainder of n. If you did not nplete Section II more than half of YES NO as a dependent YES NO mpleted by a r in-state tuition YES NO leted by your	Are you a member of the U.S. Armed forces?		
other than Virginia? If yes, which state(s)? For the entire twelve months prior to the term in whi enroll will you have:		income tax on all taxable income earned in Virginia? ☐ YES ☐ NO (If yes, please attach or mail a letter verifying Virginia employment and a copy of the most recent non-resident Virginia income tax return.)		
Filed a tax return or paid income taxes to Virginia on all earned income?	□YES □NO	I certify that the information I have provided above is true.		
Been a registered voter? ☐ YES ☐ NO In Virginia If no, please provide an explanation:	? ∐YES ∐NO	Signature of Applicant Date		
Held a valid driver's license? TYES NO In Virginia If no, please provide an explanation: Do you own or operate a motor vehicle? If yes, was it registered in Virginia during the past year If no, please provide an explanation:	☐ YES ☐ NO ? ☐ YES ☐ NO	Please review your responses carefully before submitting this form. This information will be used to determine in-state/out-of-state classification. Incomplete or inaccurate information will delay your course registration. By signing, I certify that the information provided is true and correct.		



SECTION II

PARENT/SPOUSE/LEGAL GUARDIAN INFORMATION (PLEASE PRINT.)

(To be completed by the parent, court-appointed legal guardian, or spouse. A signature is required at the end of this section. Please complete Section II in its entirety; failure to answer all questions may result in the applicant being assessed out-of-state tuition rates.)

First	Middle		Last		
Relationship to Applicant	Mother ☐ Spouse ☐ Lega	al Guardian (cod	urt documentation required)		
CITIZENSHIP STATUS U.S. CITIZEN PERMANENT RESIDENT (Please provide copy of both front and back of Form I-551/Green Card.) NON U.S. CITIZEN Visa Type Date of Issuance Date of Expiration					
NON U.S. CITIZEN Visa Type(Please	include copy of Visa)	of Issuance	Date of Expiration		
HOW LONG HAVE YOU LIVED IN VIRGINIA					
WHERE HAVE YOU LIVED FOR THE PAST TWO YEARS? (List current address first – physical address, not P.O. Box.)					
Current Address	City/State		Zip Code		
From (Month/Year)	To (Month/Year)				
Previous Address	City/State		Zip Code		
From (Month/Year)	To (Month/Year)				
WHERE HAVE YOU WORKED FOR THE PAST YEAR?					
Current Employer	Street Address		City/State		
From (Month/Year)	To (Month/Year)		Hrs Per Week		
Previous Employer	Street Address		City/State		
From (Month/Year)	To (Month/Year)		Hrs Per Week		
FOR THE ENTIRE TWELVE MONTHS PRIOR TO THE TERM IN WHICH THE STUDENT PLANS TO ENROLL, WILL YOU HAVE: Been employed Virginia?					
Been a registered voter? If no, please provide an explanation:	YES NO	In Virginia?	□YES □NO		
Held a valid driver's license? If no, please provide an explanation:	□YES □NO	In Virginia?	□YES □NO		
Do you own or operate a motor vehicle? If yes, was it registered in Virginia during th If no, please provide an explanation:	. ,	□YES □NO			
Will you have claimed the student as a dependent for federal and/or Virginia income tax purposes prior to the term in which the student will enroll?					
Will you have provided more than half of the applicant's financial support for at least one year prior to the term in which the applicant will enroll? \square YES \square NO					
Will you have filed a tax return or paid incoming yes, please provide an explanation:	<u>-</u>	Virginia?	□YES □NO		
ARE YOU A MEMBER OF THE U. S. ARMED FORCES? A. Are you permanently stationed in Virginia, Washington, D. C., or any state contiguous to Virginia? YES NO If yes, Include a copy of your most recent orders.)					
B. Have income taxes been paid to Virginia on all military income for the last year? If no, have income taxes been paid to another state? If yes, which state:			☐ YES ☐ NO ☐ YES ☐ NO		
C. Does your current leave/earnings statem If yes, effective date of change to Virgini (If yes, attach a copy of your LES, DD-21-	a:		□YES □NO		
ARE YOU A RETIRED MILITARY MEMBER WHO CURRENTLY RESIDES IN VIRGINIA AND RESIDED IN VIRGINIA AT THE TIME OF RETIREMENT? YES NO (if yes, attach a copy of your LES, DD-214, and DD-2058.)					
ANSWER THIS QUESTION ONLY IF YOU LIVE OUTSIDE VIRGINIA BUT WORK IN VIRGINIA. Do you commute from a residence outside of Virginia to a work site in Virginia for full-time employment and pay Virginia non-resident income tax on all taxable income earned in Virginia? YES NO (if yes, please attach or mail a letter verifying Virginia employment and a copy of the most recent non-resident Virginia income tax return.)					
I CERTIFY THAT THE INFORMATION I HAV	E PROVIDED ABOVE IS TRUE.				
Signature of parent, spouse, or legal guardia	an		Date		
			ed to determine in-state/out-of-state classification. certify that the information provided is true and correct		