

# APPLICATION FOR VIRGINIA IN-STATE TUITION

Completion of this form is required by the commonwealth of Virginia if you are claiming entitlement to Virginia in-state tuition rates pursuant to Section 23-7.4 Code of Virginia. All questions must be answered. When not applicable, mark the N/A box. Section A must be completed by the applicant. Section B of this form must be completed by the parent/legal guardian or spouse if the applicant is a dependent. Supporting documents and additional information may be requested. Return this form with your application for admission. If this form is not submitted, you will be classified as a non-Virginia resident.

**For office use only.**  
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## Section A - Applicant

**(Please Note:** While this information is not required for admission consideration, it is necessary for applicants who wish to be considered for financial aid and Hope Scholarship/Lifetime Learning tax credit to provide a Social Security number to the university.) To protect your privacy, your Social Security number will not be used as your student identification number.

**1. Name** \_\_\_\_\_ **2. Social Security Number** \_\_\_\_\_  
Last First M.I. Other (Last Name)

**3. Date of Birth** \_\_\_\_-\_\_\_\_-\_\_\_\_ **4. Citizenship**  U.S.  Permanent resident alien, political asylum or refugee  Non-U.S. If non-U.S., give visa type \_\_\_\_\_

**5. Where have you lived in the past two years?** (List current address first. Include dates.)  
Street address City State ZIP Code From (MM/DD/YY) To (MM/DD/YY)

### 6. Students under the age of 24 are presumed to be dependent on a parent or legal guardian unless one of the following applies? (Place a check mark beside all that apply.)

- Age 24 or older as of the first day of the semester in which you intend to enroll
- Veteran or active duty member of the U.S. Armed Forces
- Graduate or professional student
- Ward of the court or was a ward of the court until age 18
- Both parents are deceased, no adoptive or legal guardian
- Legal dependents other than a spouse
- Independent student (attach federal and state tax forms)
- Married

### 7. Do your parents or legal guardian provide over half of your financial support or claim you as a tax dependent? Yes No N/A

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

If Yes, does your spouse provide more than 50 percent of your financial support?  
 Yes  No  N/A

If "Yes" to either No. 7 or 8, Section B must be completed by a parent/legal guardian or spouse.

### 9. Will you have filed a tax return or paid income taxes to any state other than Virginia during the past year? Yes No N/A

If yes, which state(s)? \_\_\_\_\_

### 10. For at least one year prior to the semester in which you will enroll, will you have:

- a. Filed a tax return or paid income taxes to Virginia on all earned income?  Yes  No  N/A
- b. Been a registered voter in Virginia?  Yes  No  N/A
- c. Held a valid Virginia driver's license?  Yes  No  N/A

### 11. Do you own or operate a motor vehicle? Yes No N/A

If "Yes," has it been registered in any state other than Virginia during the past year?  
 Yes  No  N/A

### 12. Are you a member of the U.S. Armed Forces? Yes No N/A

If No, go to No. 13.

- a. Have income taxes been paid to Virginia on all military income for the last year?  Yes  No  N/A  
If No, have income taxes been paid to another state?  Yes  No  N/A
- b. Does the current Leave/Earnings Statement reflect Virginia withholding?  Yes  No  N/A

If Yes, effective date of change to Virginia: \_\_\_\_\_  
(Attach a copy of your LES and DD-2058.)

### 13. Is your parent/legal guardian or spouse a member of the U.S. Armed Forces?

Yes  No  N/A

If No, go to No. 14.

a. Have income taxes been paid to Virginia on all military income for the last year?

Yes  No  N/A

If No, have income taxes been paid to another state?  Yes  No  N/A

b. Does the current Leave/Earnings Statement reflect Virginia withholding?

Yes  No  N/A

If Yes, effective date of change to Virginia: \_\_\_\_\_

(Attach a copy of your LES and DD-2058.)

c. Has your parent/legal guardian or spouse claimed you as a dependent for federal and state income taxes?  Yes  No  N/A

### 14. Is your parent/legal guardian or spouse a retired military member, who currently resides in Virginia and resided in Virginia at the time of their retirement?

Yes  No  N/A

If No, go to No. 15. If Yes, effective date of change to Virginia: \_\_\_\_\_

(Attach a copy of your LES and DD-2058.)

### 15. If your spouse is in the military, will you have:

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

b. Paid income taxes to Virginia on all earned income?  Yes  No  N/A

### 16. 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  N/A

b. Paid income taxes to Virginia on all earned income?  Yes  No  N/A

c. Claimed you as a dependent for federal and state income tax purposes?  Yes  No  N/A

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

a. Paid Virginia income taxes on all taxable income earned in Virginia during the past year?  Yes  No  N/A

b. Lived in a contiguous state to Virginia?  Yes  No  N/A

### 18. If your parent/legal guardian or spouse has lived outside Virginia for the past year, will the parent/legal guardian or spouse have:

a. Paid Virginia income taxes on all taxable income earned in Virginia during the past year?  Yes  No  N/A

b. Lived in a contiguous state to Virginia?  Yes  No  N/A

c. Claimed you as a dependent for federal and state income tax purposes?  Yes  No  N/A

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 university with supporting documentation related to my application, if I am requested to do so.

**Signature of applicant (required)** \_\_\_\_\_ **Date** \_\_\_\_\_



**VCU** Division of Strategic Enrollment Management

VIRGINIA COMMONWEALTH UNIVERSITY

**Section B - Parent(s) or Legal Guardian**

If your parents/legal guardian or spouse provide over half of your financial support or claim you as a dependent, they must complete this section.

**1. Name** \_\_\_\_\_  
Last First M.I. Other (Last Name)

**2. Relationship to applicant:**  Father  Mother  Legal Guardian  Spouse

**3. Citizenship**  U.S.  Permanent resident alien, political asylum or refugee  Non-U.S. If non-U.S., give visa type \_\_\_\_\_

**4. Where have you lived in the past two years?** (List current address first. Include dates.)  
Street address City State ZIP Code From (MM/DD/YY) To (MM/DD/YY)  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**5. Will you have claimed the applicant as a dependent on your federal and state income tax returns for the tax year prior to the semester in which the applicant will enroll?**  Yes  No  N/A

**6. Will you have provided over half of the applicant's financial support for at least one year prior to the semester in which the applicant will enroll?**  Yes  No  N/A

**7. Will you have filed a tax return or paid income taxes to any state other than Virginia during the past year?**  Yes  No  N/A  
If yes, which state(s)? \_\_\_\_\_

**8. For at least one year prior to the semester in which the applicant will enroll, will you have:**

- a. Filed a tax return or paid income taxes to Virginia on all earned income?  Yes  No  N/A
- b. Been a registered voter in Virginia?  Yes  No  N/A
- c. Held a valid Virginia driver's license?  Yes  No  N/A

**9. Do you own or operate a motor vehicle?**  Yes  No  N/A  
If Yes, has it been registered in any state other than Virginia during the past year?  
 Yes  No  N/A

**10. Are you a member of the U.S. Armed Forces?**  Yes  No  N/A

If No, go to No. 11  
a. Have income taxes been paid to Virginia on all military income for the last year?  
 Yes  No  N/A  
If No, have income taxes been paid to another state?  Yes  No  N/A  
b. Does the current Leave/Earnings Statement reflect Virginia withholding?  
 Yes  No  N/A  
If Yes, effective date of change to Virginia: \_\_\_\_\_  
(Attach a copy of your LES and DD-2058.)

**11. Are you a retired military member, who currently resides in Virginia and resided in Virginia at the time of your retirement?**  Yes  No  N/A

If Yes, effective date of change to Virginia: \_\_\_\_\_  
(Attach a copy of your LES and DD-2058.)

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, the applicant may be subject to repayment of tuition or dismissal. I agree to furnish the university with supporting documentation related to this application, if I am requested to do so.

**Signature of parent/legal guardian or spouse (required)** \_\_\_\_\_ **Date** \_\_\_\_\_