RADFORD UNIVERSITY
Office of the Registrar

APPLICATION FOR IN-STATE TUITION RATES

Student Name:	
Student ID Number or Social Security Number:	
Local Address:	
Local Phone Number:	
Date of Birth:	
Permanent Address:	
If your permanent address is different than your local address, how many months out of the year do you live at the permanent address?	
Email Address:	

Are you a U.S. Citizen? ☐ Yes ☐ No If not, please specify: _____

Country of origin: _____

Type of Visa: _____ (Please attach a copy of both front & back of VISA or green card.)

Date of Issue: _____

Expiration Date: _____

Term in which you are requesting in-state tuition rates (Must be a future term): _____

Beginning with your current address, please list your residence locations for the past four years with specific beginning and ending dates:	
Current:	
From:	**To:**
Prior:	
From:	**To:**
Prior:	
From:	**To:**
Prior:	
From:	**To:**

1. Classification you wish your in-state tuition based on:
   - ☐ Your own Virginia Domicile
   - ☐ Dependency on a parent or guardian who is domiciled in Virginia who provides 50% or more of your financial support or claims you as a tax dependent
   - ☐ Dependency on your spouse who provides 50% or more of your financial support

2. Do any of the following characteristics apply to you? Place a check mark beside all that apply:
   - ☐ Age 24 or older
   - ☐ Ward of the court or was a ward of the court until age 18
   - ☐ Veteran or active duty member of the U.S. Armed Forces
   - ☐ If both parents are deceased, no adoptive or legal guardians
   - ☐ Graduate Student
   - ☐ Legal dependents other than a spouse

3. What are your post-graduation plans? Please attach any documentation you have to confirm these plans.

4. To provide additional support for the above questions, please fill out the following table, based on your monthly income and expenses.

Source of expenses (i.e., telephone bill, rent, etc.)	Monthly Cost (Estimate)	Amounts of Financial Support/ Income & Sources

Domicile/Supplemental Information

1. Have you been employed in Virginia for the past year? ☐ Yes ☐ No

   If no, were you: ☐ Not employed or ☐ Employed in another state

2. 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

   If no, were taxes paid to: ☐ Another state or ☐ Didn't file

3. Are you a registered voter in Virginia? ☐ Yes ☐ No

   If no, are you registered to vote in another state? ☐ Yes ☐ No

4. Do you hold a valid Virginia drivers' license? ☐ Yes ☐ No

   If no, do you hold a license in another state? ☐ Yes ☐ No

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

   If no, is it registered in another state? ☐ Yes ☐ No

6. Have you lived outside Virginia for the past year? ☐ Yes ☐ No

   If yes, will you have been employed in Virginia and earned at least $10,300 during the past year?

   ☐ Yes ☐ No

7. Paid Virginia income taxes on all taxable income earned in Virginia during the past year?

☐ Yes ☐ No

8. Do you have health insurance? ☐ Yes ☐ No

If yes, who is responsible for paying the premium? What is the approximate cost?

9. Do you have auto insurance? ☐ Yes ☐ No

If yes, who is responsible for paying the premium? What is the approximate cost?

10. Why did you move to Virginia?

11. Please provide any other information you feel is relevant to your case. Additional pages may be attached.

For Military Applicants Only

Who is a member of the Armed Forces? ☐ Self ☐ Parent/Legal Guardian ☐ Spouse

Answer corresponding questions according to your answer:

SELF/SPOUSE

1. 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

2. Does the current Leave/Earnings statement reflect Virginia withholding? ☐ Yes ☐ No

   If yes, effective date of change to Virginia ☐

PARENT/LEGAL GUARDIAN

1. Have income taxes been paid to Virginia by the military parent for the last year? ☐ Yes ☐ No

   If "no" has non-military parent/guardian paid Virginia taxes on all earned income for the last year?

   ☐ Yes ☐ No

2. Does the current military Leave/Earnings Statement reflect Virginia withholding? ☐ Yes ☐ No

   If "yes", effective date of change to Virginia ☐

3. Does the military member claim you as a dependent for federal and Virginia income tax purposes?

   ☐ Yes ☐ No

- **Parent/Legal Guardian/Spouse Information:** Please have your parent/legal guardian or spouse answer the following questions.

What is your relationship to the applicant?

☐ Mother ☐ Father ☐ Legal Guardian ☐ Spouse

1. Have you been employed in Virginia for the past year? ☐ Yes ☐ No

   If no, were you: ☐ Not employed or ☐ Employed in another state

2. 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

   If no, were taxes paid to: ☐ Another state or ☐ Didn't file

3. Are you a registered voter in Virginia? ☐ Yes ☐ No

   If no, are you registered to vote in another state? ☐ Yes ☐ No

4. Do you hold a valid Virginia drivers' license? ☐ Yes ☐ No

   If no, do you hold a license in another state? ☐ Yes ☐ No

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

   If no, is it registered in another state? ☐ Yes ☐ No

6. Have you lived outside Virginia for the past year? ☐ Yes ☐ No

   If yes, will you have been employed in Virginia and earned at least $10,300 during the past year?
   ☐ Yes ☐ No

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

7. Did you claim the applicant as a dependent for federal and Virginia income tax purposes?

   ☐ Yes ☐ No

- **Parent/Legal Guardian/Spouse Information**

Beginning with your current address, please list your residence locations for the past four years with specific beginning and ending dates:	
Current:	
From:	**To:**
Prior:	
From:	**To:**
Prior:	
From:	**To:**
Prior	
From:	**To:**

- **Parent/Legal Guardian/Spouse Certification and Signature**

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 and/or I may be subject to repayment of tuition, dismissal, or both. I agree to furnish the college or university with supporting documentation related to my application.

Signature: _____ Date: _____

- **Student Certification and Signature**

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, dismissal, or both. I agree to furnish the college or university with supporting documentation related to my application.

Signature: _____ Date: _____

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