

PERMISSION TO REGISTER FOR UNDERGRADUATE COURSES NON-DEGREE SEEKING APPLICATION

105 Heth Hall | PO Box 6904 | Radford, VA 24142 | Telephone: 540-831-5271 | Fax: 540-831-6642

This form is designed for students who have <u>not</u> attended RU as an undergraduate student and want to enroll in undergraduate courses without being admitted as a degree candidate. (Students may register for a maximum of 24 semester hours as a non-degree seeking student.) **Send application and transcripts to: Radford University Registrar's Office P.O. Box 6904, Radford, VA 24142 or email: registrar@radford.edu**

GENERAL INFORMATION												
First Name:	Middle Name:			Last Name:	_ast Name:		Preferred Name:					
Address:												
<u>'</u>	STREET ADDRESS		CITY STATE ZIP CODE					ZIP CODE				
Telephone:	Social Security Number:		:			Date of Birth	:	(mm/dd/yy)				
Email Address:				RU	Employee:	□ Yes □	□ No					
Year and semester you plan to attend: Year				Classification:								
□ Fall □ Wintermester □ Spring				☐ College Student taking classes while enrolled at another institution (Letter of good standing or transcripts from all previous and current institutions reflecting at least a 2.0 cumulative GPA required)								
□ Maymester □ Summer I					☐ Working towards Certificate: (please include name of certificate program)							
□ Summer II □ Summer III				☐ Special non-degree (Letter of good standing or transcripts from all previous schools including last course work attempted reflecting at least a 2.0 cumulative GPA)								
					☐ High school student (Must submit a letter of permission from high school)							
ENROLLMENT INFORMATION												
Have you ever attended RU?												
High School you attend(ed): High School Graduation Date: High School Graduation Date:												
If yes, list school(s) attended, dates, and degrees earned												
BIOGRAPHICAL INFORMATION *TO MEET REQUIREMENTS OF FEDERAL REGULATIONS, THIS INFORMATION IS REQUESTED FOR RECORD KEEPING PURPOSES ONLY. THIS INFORMATION WILL IN NO WAY IMPACT DECISIONS												
☐ Hispanic of any race ☐ Male ☐ Sing ☐ American Indian or Alaskan Native ☐ Female ☐ Main ☐ Sep ☐ Black or African American ☐ Main ☐ Sep ☐ Wice		Marital Status ☐ Single ☐ Married ☐ Separated ☐ Widowed ☐ Divorced	☐ Married ☐ Separated ☐ Widowed		Citizenship: U.S. Citizenship Permanent Resident Alien Alien Registration #							
HONOR COD												
•	been convicted of, or are explain on a separate shee	, .	charged with, a c	riminal	offense other	r than minor t	raffic violation	s? ∐ Yes ∐ No				
Have you ever been placed on disciplinary probation, declared ineligible to register for any period of time, suspended, or dismissed from any high school, college, or university? Yes No * If yes, please give name of institution, date of action, and fully explain on a separate sheet.												
By my signature, I certify all information supplied on this form is correct and I understand that falsification of information may result in termination of my course registration.												
SIGNATURE: DATE:												

IMPORTANT: To be considered for in-state tuition, you must submit the attached Application for Virginia In-State Tuition Rates.



APPLICATION FOR VIRGINIA IN-STATE TUTION RATES

Eligibility for in-state tuition is pursuant to Section 23-7.4, Code of Virginia. Failure to complete and return this form to the university will result in an out-of-state classification for tuition purposes. Please contact the Registrar's Office if you have any questions.

SECTION A: TO BE COMP	PLETED BY STUDE	NT						
1. Name:		irst	S: Middle					
(Print full name) Last								
2. How long have you lived	in Virginia?				_			
3. Citizenship: □ U.S.	. Citizenship: U.S. Non-U.S. Permanent Resident (Please attach a copy of your green card) Date of VISA issue:// Date of VISA:// VISA typ							
4. Where have you lived for	the past two years?	(List current address first)						
From (mo/yr) To (mo/yr)	Street Address			City	State			
				·				
, ,			oort or claim you as a tax de					
	_		ır parent or legal guardia	ın.				
b. If you are married, do	you want to claim e	eligibility for in-state tuition o	on your spouse's domicile?					
□ No □ Yes	If yes, Section B n	nust be completed by you	ır spouse.					
6. If you are under the a any that apply to you:	ge of 24, Section E	B must be completed by y	our parent or legal guardian	(court appointed). Place a	check mark beside			
☐ Veteran of acti	ve duty member of t	he US Armed Forces						
☐ Graduate/first	professional student							
□ Married								
☐ Have legal dep	endents other than s	spouse						
☐ Both parents d	eceased, no adoptive	e or legal guardian						
☐ Ward of the co	ourt until age 18 (Co	urt documentation requi	red)					
7. Will you have filed a tax	return or paid incom	e taxes to any state other th	an Virginia? □ No □	Yes				
8. For the entire twelve more	nths prior to the tern	n in which you enroll, will yo	u have:					
a. filed a tax return or p	aid income taxes to	Virginia on all earned income	e? □ No □ Yes					
b. been a registered vot		□ Yes						
		o □ Yes If yes, date issued	d:/					
d. owned or operated a			1 Yes					
·	_	ntly on active duty? If No, go	to guestion 10. No	□ Yes				
		,	e twelve months prior to the					
□ No □ Yes	,	,		,				
	our leave and earnin	gs statement (LES)? □ No	☐ Yes * Please attac	ch a copy of your current	t LES.			



10. Will you have lived outside Virginia, worked in Virginia, earned at least the equivalent of a full time wage salary, and paid Virginia income taxes on all taxable income earned in this Commonwealth for at least twelve months prior to the term in which you will enroll? ☐ Yes If yes, please attach a copy of your current Virginia income tax forms. **SECTION B: PARENT, LEGAL GUARDIAN, OR SPOUSE** 1. Name of parent, legal guardian, or spouse (Print Name) 2. Relationship to applicant ☐ Parent ☐ Court appointed legal guardian □ Spouse (Court documents required) 3. Where have you lived for the past two years? (list current address first) From (mo/yr) To (mo/yr) Street Address City State 4. For the entire twelve months prior to the requested enrollment term, will you have: a. been employed in Virginia? ☐ No ☐ Yes b. filed a tax return or paid income taxes to Virginia on all earned income? ☐ No ☐ Yes c. been a registered voter in Virginia? ☐ No ☐ Yes d. held a valid Virginia driver's license? ☐ No ☐ Yes **If yes, date issued:** ___ e. owned or operated a motor vehicle registered in Virginia? ☐ No □ Yes 5. Are you presently in the military? □ No ☐ Yes a. Have income taxes been paid to Virginia on all military income for the past twelve months prior to the term in which the student will enroll? □ No □ Yes b. Is Virginia listed on your leave and earnings statement (LES)? ☐ Yes * Please attach a copy of your current LES. c. Are you assigned to a permanent duty station within Virginia, the District of Columbia, or a state contiguous to Virginia, AND reside in Virginia? ☐ Yes * Please attach a copy of your military orders. 6. Answer this question **only** if you live outside Virginia but work in Virginia. Will you have lived outside Virginia, worked in Virginia, earned at least the equivalent of a full time wage salary, and paid Virginia income taxes on all taxable income earned in this Commonwealth for at least twelve months prior to the term in which the student will enroll? ☐ Yes If yes, please attach a copy of your current Virginia income tax forms. 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 Date Date Signature of Parent/Legal Guardian or Spouse

(if required to furnish parental or spouse information)