



Application for Virginia In-State Educational Privileges

Submit this form **ONLY** if you believe you are eligible for in-state educational privileges pursuant to the Code of Virginia, Section 23-7.4. Answer all questions and provide explanations where necessary. Avoid delaying the determination process: mail or fax supporting documentation when this form is submitted. You may be ineligible for in-state privileges if the Application and all supporting documents are not received by the appropriate deadline. Applications received after the first day of class of the semester for which in-state privileges are sought will not be reviewed. Supporting documents may be mailed to: Committee on Virginia Status, Office of Admission, P. O. Box 400160, Charlottesville, Virginia 22904 or faxed to: 434-982-2663.

Appeals

Pursuant to Virginia law and University policy, an applicant has the right to appeal if denied in-state privileges. If you intend to appeal you must notify the Director of the Committee on Virginia Status, in writing, no more than fourteen calendar days from the date of the denial. If the applicant's notification of intent to appeal is not timely, an appeal will not be reviewed by the Committee. If the Committee affirms the denial of eligibility, the applicant has a right to final administrative review by the Office of the President. This request for review must be made to the Director of the Committee on Virginia Status no more than fourteen calendar days after receipt of the Committee's determination. Untimely requests will not be reviewed by the Office of the President.

Instructions

Section A must be completed by all applicants seeking in-state privileges.

Sections B and C must be completed by applicant's parent, legal guardian or spouse if applicant is under the age of 24 and listed as a dependent on state and federal tax returns of parent or legal guardian or if applicant's parent, spouse or legal guardian has provided applicant with substantial financial support during the past year. If applicant is over age 24 and claimed as a dependent on state and federal tax returns by parent, parent must complete Sections B and C. If applicant's parent or spouse has provided substantial financial support during the past year, parent or spouse must complete Sections B and C.

Sections A and C must be completed by applicant if applicant is financially independent, regardless of age and applicant's parent or legal guardian do not claim applicant as a dependent for income tax purposes or have not provided applicant with substantial financial support for past year; or by applicant who is an emancipated minor.

All applicants must sign and date form. If applicant's parent, spouse or legal guardian completed Sections B and C, parent, spouse or legal guardian must also sign and date form.

Citizenship Information

If applicant is not a United States citizen, please mail or fax a copy of visa or Permanent Resident card. If applicant's visa or permanent resident card is in process, mail or fax all available documentation when this form is submitted. If applicant's parent, spouse or legal guardian completes Sections B and C of this form, applicant must provide a copy of parent, spouse or legal guardian's visa or Permanent Resident card. If parent, spouse or legal guardian's visa or permanent resident card is in process, mail or fax all available documentation.

Military Information

If applicant is in military or claims eligibility based upon parent, spouse or legal guardian in military please mail or fax current Leave and Earnings statement or Active Duty Orders or proof of separation or retirement from service. If documentation is not mailed when this form is submitted the determination process will be delayed.

Divorced or Separated Parents

Applicant may claim eligibility through parent with whom he or she lives in Virginia or parent who claimed applicant as dependent for tax purposes for past year or parent who provide substantial financial support.

Please contact the Committee on Virginia Status at 434-982-3391 with any questions.

c. held a valid Virginia driver's license? Date issued: _____ Yes No
If no, are you licensed to drive in any state? Yes No

7. Do you own or operate a motor vehicle? Yes No
If yes, has it been registered in Virginia during all of the past year? Date registered: _____ Yes No
If no, where has it been registered? _____

8. ANSWER THIS QUESTION **ONLY** IF YOU OR YOUR PARENT IS A NONRESIDENT EMPLOYED IN VIRGINIA.
Do you or your parent commute from a residence outside 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, mail or fax a letter verifying Virginia employment, including dates and salary, and a copy of most recent non-resident Virginia income tax return.

9. ANSWER THIS QUESTION **ONLY** IF YOU, YOUR PARENT OR SPOUSE ARE IN THE MILITARY.

a. Are you, your parent or your spouse currently in the military? If yes, check: self parent/spouse Yes No

b. Are resident Virginia income taxes being paid on all military income? If yes, as of what date? _____ Yes No
If yes, to both (a) and (b), mail or fax a current copy of a Leave and Earnings Statement reflecting Virginia withholding. Date sent: _____

Where were you, parent, or spouse stationed on that date? _____

c. Are you, parent, or spouse active duty military personnel stationed to a permanent duty station in Virginia, Washington, D.C., or any state contiguous to Virginia? Yes No

d. Are you, parent, or spouse currently residing in Virginia? Yes No

If yes to both (c) and (d), mail or fax a copy of your current military orders reflecting Virginia assignment. Date sent: _____

e. Are you, parent or spouse retired or separated from military and living in Virginia? Yes No

If yes, mail or fax documentation. Date sent: _____

PLEASE USE THE SPACE BELOW (OR ATTACH ADDENDA) TO EXPLAIN ANY OF YOUR RESPONSES, IF NECESSARY:

By signing this form you, your parent, spouse or legal guardian are affirming that all the information provided is correct and true.

APPLICANT SIGNATURE _____ DATE _____

PARENT, SPOUSE, OR LEGAL GUARDIAN SIGNATURE _____ DATE _____

Please review your responses carefully before submitting this form. This information will be used to determine the applicant's eligibility for in-state privileges. Incomplete or incorrect information will delay the review of the application for admission.