



Reclassification Request for Virginia In-State Tuition Rates

This form should be completed if you are claiming entitlement to Virginia in-state tuition rates pursuant to section 23.1-506 Code of Virginia. You must answer all questions. Part I must be completed by the applicant. Part II of this form must be completed by a parent/legal guardian if the applicant is under the age of 24 and has not presented clear and convincing evidence of independence or by the spouse if the applicant is dependent on the spouse and wishes to claim eligibility through the spouse's domicile. Supporting documentation and additional information are required as outlined on the coversheet.

EXPLANATION OF FACTORS TO DETERMINE DOMICILE

Please review the following list very carefully. This list demonstrates types of information and details that will assist the college officials in determining your eligibility for in-state tuition rates. Please complete the Reclassification Request Application and submit it with all supporting documents to Admissions. **Supporting documentation is presented for the person upon whom the domicile is based.** All applicable items should be included. You are responsible for ensuring the accuracy and completeness of the Reclassification Request Application.

1. **Cover Letter and any items below that are applicable:**
2. **Continuous residence for a period of at least one year (365 days) prior to the first day of classes.**
Suggested documentation:
 - a. Copy of leases from each place of residence (Rent receipts will not be accepted)
 - b. Copy of mortgage agreement
 - c. If you have no lease agreement or mortgage provide a notarized letter from the person you are living with stating what amount you contribute per month and how long you have been residing at the address.
3. **State to which income taxes are filed and paid.**
Submit evidence that the applicant has filed Virginia taxes (760) and Federal taxes (1040) for the previous tax year. (Tax forms should be signed and dated).
Applicants should submit all pertinent W-2 forms received from employer(s) as proof of earnings.
4. **Employment**
The applicant should submit a letter from his/her employer stating the starting date and number of hours worked per week.
5. **Valid Virginia driver's license-** Submit a clear copy of driver's license, both front and back.
6. **Valid Virginia voter's registration card-** Submit a copy of your card.
7. **Valid Virginia vehicle registration-** Submit a copy of your registration.
8. **Ownership of real estate property-** Submit evidence of property ownership.
9. **Social and/or economic ties with Virginia-** Submit valid evidence that the applicant has immediate family in the area. The applicant may also submit evidence that he/she has a professional license issued by a Virginia agency. This information will help support a claim of domiciliary intent.

COVER LETTER INSTRUCTIONS

All students must submit a signed cover letter to support their claim to be reclassified from out-of-state to in-state for tuition purposes. The cover letter should include the following but not all inclusive:

- When you moved to Virginia (dates)
- Employment information (starting dates)
- Any information describing why you should be considered for reclassification for in-state tuition
- The student's signature

PART I-APPLICANT

Student name: _____ EMPLID # _____ Telephone # _____

Date you moved permanently to Virginia (mm/dd/yr): ___/___/___ Birthdate ___/___/___

Are you a U.S. citizen? YES NO If not, are you a permanent resident YES NO A# _____

1. Do you wish to apply for instate tuition based on:

- Your own Virginia domicile
- Dependency on a parent/legal guardian who is domiciled in Virginia-**Part II must be completed**
- Dependency on a spouse who is domiciled in Virginia (The spouse must provide 50% or more of your financial support)-**Part II must be completed**
- Military Exception (*Note: Under section 23.1 506, a child and/or spouse of a military person stationed in Virginia is eligible for instate tuition regardless of domicile. A copy of the military orders verifying active duty military status and permanent duty station within Virginia; documentation verifying Virginia residence; and copy of military dependent card issued by the military*)
- Non-resident (not currently residing in Virginia), employed full-time in Virginia and paying Virginia income tax. (*Note: Generally, individuals who wish to qualify for this exception must reside in a state for which Virginia has no tax reciprocity, be employed full-time in Virginia and have paid Virginia income tax.*)

2. List your current and previous address **for the last two-year period** preceding the term in which you will enroll.

List current address first:

| From | To | Street/Address | City | State | Zip |
|-------------|---------------|----------------|-------|-------|-------|
| ___/___/___ | - PRESENT | _____ | _____ | _____ | _____ |
| ___/___/___ | - ___/___/___ | _____ | _____ | _____ | _____ |

3. Employment Information (List current or most recent employment first):

| From | To | Employer/City & State |
|-------------|---------------|-----------------------|
| ___/___/___ | - ___/___/___ | _____ |
| ___/___/___ | - ___/___/___ | _____ |

4. State(s) in which you filed a tax return or paid income taxes to during the previous year _____

5. Did you file as a part-year resident? Yes No

If you did not file a state income tax return or pay state income taxes in the previous year, check here

6. Voter Registration: State: _____ Date of Registration: ___/___/___

7. Driver's License: State: _____ Date of Issue: ___/___/___

8. Motor Vehicle Registration: State: _____ Date of Registration: ___/___/___

9. Are you/your spouse/parent/legal guardian (circle one) in the military? YES NO N/A
If "YES," does the current Leave and Earning Statement reflect Virginia withholdings? YES NO N/A

10. Do you have the present intention to remain in Virginia indefinitely? YES NO

11. Are you or your spouse active duty military? YES NO
If "YES," does the current Leave and Earning Statement reflect Virginia withholdings? (The most recent copy must be submitted) YES NO

I certify under a penalty of disciplinary action that the information I have provided is true.

Signature of Applicant

Date

PART II - PARENT/LEGAL GUARDIAN/SPOUSE

Name of person completing this section: _____

Relationship to Applicant: Mother Father Legal Guardian Spouse

Date you moved permanently to Virginia (mm/dd/yr): ___/___/___

Are you a U.S. citizen? YES NO If not, are you a permanent resident YES NO A# _____

1. List your current and previous addresses **for the last two-year period. List current address first:**

| From | To | Street/Address | City | State | Zip |
|-------------|---------------|----------------|-------|-------|-------|
| ___/___/___ | - PRESENT | _____ | _____ | _____ | _____ |
| ___/___/___ | - ___/___/___ | _____ | _____ | _____ | _____ |

2. Employment Information (**for at least one year** prior to the date for which in-state rates are being sought):

| From | To | Employer/City & State |
|-------------|---------------|-----------------------|
| ___/___/___ | - ___/___/___ | _____ |
| ___/___/___ | - ___/___/___ | _____ |

3. State(s) in which you filed a tax return or paid income taxes to during the previous year_

4. Did you file as a Part-year resident Yes No

If you did not file a state income tax return or pay state income taxes in the previous year, check here

5. Will the applicant be claimed as a dependent on your federal **and** Virginia income tax returns for the year prior to the term for which instate tuition rates are being sought?

6. Will you provide 50% or more of the applicant's financial support for the year prior to the term for which instate tuition rates are being sought?

7. Voter Registration: State: _____ Date of Registration: ___/___/___

8. Driver's License: State: _____ Date of Issue: ___/___/___

9. Motor Vehicle Registration: State: _____ Date of Registration: ___/___/___

I certify under a penalty of disciplinary action that the information I have provided is true.

Signature of Parent/Legal Guardian/Spouse

Date

For Office use Only: APPROVED TERM: Fall Spring Summer Year _____
 VA domicile Military Exception VA domicile via parent/legal guardian/spouse

Non-resident

DISAPPROVED (reasons attached)

Signature of College Official

Date