



Office of the University Registrar
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 Norfolk, VA 23529
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APPLICATION FOR VIRGINIA IN-STATE TUITION

- This form must be completed if you are claiming entitlement to in-state tuition benefits pursuant to [§23.1-500-510](#) of the Code of Virginia.
- Supporting documents and additional information may be requested.
- You MUST complete, sign, and submit this form before the first day of classes of the term for which you are applying.
- All questions must be answered. Incomplete/unsigned applications will experience delay in processing.

SECTION A: APPLICANT (you, the student)

Term for which you are applying for Virginia in-state status: Fall Spring Summer Year: 20_____

Name: _____
 (Last Name, First Name, Middle Name or Initial)

Date of Birth: _____ University ID Number: _____ Social Security Number: _____
(if known) (optional—for Federal reporting purposes)

Email Address: _____ Daytime Phone: _____

If you are not a U.S. citizen or Permanent Resident, please answer this question. Do you hold an F-1 or J-1 visa?

- Yes Stop Here. You are not eligible for in-state tuition in Virginia.
 No Please specify your visa type, expiration date, and attach a copy of your I-94 or I-797
 Visa Type _____ Expiration Date: _____

SECTION B: STUDENT INDEPENDENT/DEPENDENT STATUS

- | | |
|--|--|
| 1. Will you be age 24 or older before the first day of classes? | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| 2. Are you a veteran or active duty member of the U.S. Armed Forces? | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| 3. Will you be enrolled in a graduate or professional program (beyond a Bachelor's degree)? | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| 4. Are you married? | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| 5. Are you an orphan or a ward of the court, or were you a ward of the court until age 18? | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| 6. Do you have any legal dependents (other than a spouse)? | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| 7. Did you file an <u>individual</u> Federal tax return last year? (no one claimed you as a dependent) | Yes <input type="checkbox"/> No <input type="checkbox"/> |

If you answered Yes to any question, continue to Section C below.
 If you answered No to every question... Stop here... sign below and have your parent/legal guardian complete Section C.

SECTION C: RESIDENCY

Who is completing Section C? (check one)

- Applicant** – Please continue to question 1 below
 Parent
 Spouse
 Legal Guardian (please attach proof of legal guardianship)

Parent, Spouse, or Legal Guardian, please answer the following two questions:

- Will you have claimed the applicant as a dependent on your income taxes during the last 12 months? Yes No
- Will you have provided over half of the applicant's financial support during the last 12 months? Yes No

1. Name: _____
Last First Middle

2. Citizenship (please complete if parent): U.S. or Permanent Resident Non-U.S. If non-U.S. give visa type: _____

Section C continued

3. Where have you lived in the last two years?

CURRENT ADDRESS

From (mm/yy): _____ Street Address: _____

To (mm/yy): _____ City, State, Zip: _____

Country: _____

PREVIOUS ADDRESS (required if you have lived at your current address less than two years)

From (mm/yy): _____ Street Address: _____

To (mm/yy): _____ City, State, Zip: _____

Country: _____

- 4. Have you lived in Virginia for more than 365 days? Yes No
- 5. Do you have the present intention to remain indefinitely in Virginia? Yes No
- 6. Will you have filed a tax return and paid income taxes to Virginia during the last 12 months? Yes No
- 7. Do you have a valid Virginia driver's license? Yes No
If **YES**, will you have held that license for the entire 12 months prior to the first day of applicant's classes? Yes No
- 8. Are you a registered Virginia voter? Yes No
If **YES**, will you have been a registered Virginia voter for the entire 12 months prior to the first day of applicant's classes? Yes No
- 9. Do you own a motor vehicle that is registered in the state of Virginia? Yes No
If **YES**, will you have owned this vehicle for the entire 12 months prior to the first day of applicant's classes? Yes No
- 10. If you live outside Virginia but have worked in Virginia during the past 12 months, did you file Virginia taxes on all taxable income earned? Yes No
- 11. If you answered NO to any one of the questions 4 through 7 above, and are a veteran, active duty service member, military dependent, or Fry Scholarship recipient, please sign, date, and return this form along with the Active Duty/Veteran **OR** Military Spouse/Dependent Tuition Benefit Form you will find at the link below.

Forms location: <http://www.odu.edu/registrar/forms>

Return **all** forms with requested documentation. Your tuition status will be determined based on the information you provide. Until then, your account will display out-of-state tuition rates.

SECTION D: SIGNATURES

The applicant must sign below. If **Section C** has been completed by a parent, spouse, or legal guardian, that person must also sign below. To "sign" this document electronically, click the signature field and enter your name and the date you are completing the form. Using this method is considered the same as your handwritten signature. You may also enter a digital signature if you have one.

Please be aware that changes to your domicile may affect your eligibility for financial aid, including aid that has already been disbursed. If you have questions, please contact the Office of Financial Aid.

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

Signature of Applicant (student)

Date

Signature of Parent, Spouse, or Legal Guardian

Date