Domicile Appeals Administration
Office of the University Registrar
4400 University Drive, MS 3D1
Fairfax, Virginia 22030-4444
Telephone: 703-993-2464 Facsimile: 703-993-2467
website: registrar.gmu.edu/students/domicile/
email: domicile@gmu.edu

Request for Final University Review

INSTRUCTIONS

THIS FORM MUST BE TYPED. Hand written forms will not be processed. A fillable version of this form is accessible using Adobe Reader (http://get.adobe.com/reader).

For office use only
☐ New Student
☐ Continuing Student

A student may appeal to the Domicile Appeals Committee provided he/she has first obtained a Reconsideration decision at the Intermediate Level.

Semester of Appeal: Spring 2016

Student Information

Student ID _____ GMU Email Address: _____@gmu.edu

Last Name _____ Home Phone _____

First Name _____ Work Phone _____

MI _____ Suffix (Jr., II) _____ Cell Phone _____

Request for IN-STATE tuition rates beginning with this semester (check one):

☐ Fall ☐ Spring ☐ Summer Year: _____

Basis of Request (check as appropriate):

☐ Disagreement with intermediate level interpretation of facts.

☐ Disagreement with the intermediate level interpretation of law (Domicile Guidelines & Code of Virginia, 23-7.4).

☐ Other (please specify)

_____

Factual Basis for Appeal

Please attach an explanation detailing the basis of your disagreement with the previous decision.

Students with a pending appeal are responsible for payment of the out-of–state tuition rate and any other associated fees. Students must also meet any payment deadlines established with the University.

I hereby certify that the information given is true, accurate, and complete. I also understand that if I fail to respond to all questions or I knowingly provide erroneous information in an attempt to evade payment of out-of state tuition and fees, I will be charged out-of-state tuition and fees for each term attended and be subject to dismissal from the University per the Code of Virginia section 23-7.4.

_____ _____

You agree that by typing your name, you are electronically signing this document. **Date**