



# Application for In-State Tuition Rates

George Mason University, 4400 University Drive MSN 3D1, Fairfax, VA 22030 - Phone: 703-993-2441 - Fax: 703-993-4668

This form must be completed if you are claiming entitlement to Virginia in-state tuition rates pursuant to Section 23-7.4, Code of Virginia. Section A must be completed by the applicant. Section B of this form must be completed by the parent, spouse, or legal guardian. Supporting documents and additional information may be requested. Admitted students who register for classes while in pending domicile status will be assessed out-of-state tuition rates.

## Section A - Applicant

1) Will you apply for Virginia in-state tuition rates? If yes, VA In State Tuition form must be completed. Yes  No

**NOTE: Answering "No" to this question will automatically result in out-of-state tuition classification.**

2) Name of Applicant \_\_\_\_\_

3) Social Security No. (requested) \_\_\_\_\_ 4) Date of Birth \_\_\_\_\_

5) Citizenship Status US  Permanent Resident  Non-US Citizen, Nonperm. Resident

Do you have a pending Permanent Resident Status? Yes  No

If yes, please provide the date of application for Permanent Residence: \_\_\_\_\_

Indicate the type of visa you currently hold: \_\_\_\_\_

Visa Award Date: \_\_\_\_\_ Visa Expiration Date: \_\_\_\_\_

6) How long have you lived in Virginia? Years: \_\_\_\_\_ Months:

7) Do you currently live outside of Virginia and still consider yourself to be a Virginia resident? Yes  No

8) Have you lived at your current address for less than two years? Yes  No

If you have lived at your current address for less than two years, please provide information for your previous addresses.

From (mo/yr)	To (mo/yr)	Street Address	City	State	Zip
				<input style="width: 100%; height: 20px;" type="text"/>	
				<input style="width: 100%; height: 20px;" type="text"/>	

**Students under the age 24 are presumed to be dependent on a parent, spouse, or legal guardian unless one of the following factors apply:**

- 9) a. Are you age 24 or older? (as of the first day of the term in which you intend to enroll) Yes  No   
 b. Are you a veteran or active duty member of the U.S. armed forces? Yes  No

- c. Are you a ward of the court or were you a ward of the court until age 18? Yes  No
- d. Are both of your parents deceased and you have no adoptive or legal parents? Yes  No
- e. Are you a graduate/professional student? Yes  No
- f. Do you have a legal dependent(s) other than your spouse (e.g., child)? Yes  No
- g. Are you married? Yes  No

10) If you are currently enrolled in a public college or university, please list the school:

Are you paying in-state tuition rates? Yes  No

11) Do parents, spouse, or legal guardian(s) provide more than half of your financial support or claim you as a dependant? Yes  No

**If yes, Section B must also be completed by parent, spouse, or legal guardian.**

12) a. For the 12 months prior to the term in which you will enroll, will you have filed a Virginia income tax return or paid income tax on all earned income? Yes  No

b. Are you exempt from filing an income tax return? Yes  No

If no, where did you file a tax return or pay income taxes?

13) For the 12 months prior to the term in which you will enroll, have you:

a. been a registered voter in Virginia? Yes  No

b. held a valid Virginia driver's license or Virginia ID card? Yes  No

c. if you own a motor vehicle, had your motor vehicle registered in Virginia? Yes  No

14) Are you an active duty member of the U.S. armed forces? Yes  No

If no, skip to Question 15.

If yes, are Virginia income taxes currently paid on all military income? Yes  No

If yes, provide the Office of Admissions with copies of your military orders and an LES or State of Legal Residence Certificate showing Virginia as your state of legal residence for income tax purposes.

15) Are you a retired military member, who currently resides in VA and resided in VA at the time of your retirement? Yes  No

If yes, provide the Office of Admissions with copies of your military orders and an LES or State of Legal Residence Certificates showing Virginia as your state of legal residence for income tax purposes, provided a copy of your military orders, ID card, and lease/deed.

16) Within the last year have you lived outside of VA but worked in VA and earned at least the equivalent of a full-time minimum wage salary, and paid income taxes to Virginia during the last 12 months? No

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

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

## Section B - Parent, Spouse, or Legal Guardian

**Section B of this form must be completed by the parent, spouse, or legal guardian.**

1) I am the applicant's:      Parent       Legal Guardian       Spouse

Name \_\_\_\_\_

2) Citizenship Status      US       Permanent Resident       Non-US Citizen, Nonperm. Resident

Do you have a pending Permanent Resident Status?    Yes     No

If yes, please provide the date of application for Permanent Residence: \_\_\_\_\_

Indicate the type of visa you currently hold: \_\_\_\_\_

Visa Award Date: \_\_\_\_\_      Visa Expiration Date: \_\_\_\_\_

3) How long have you lived in Virginia?    Years: \_\_\_\_\_      Months: \_\_\_\_\_

4) Do you currently live outside of Virginia and still consider yourself to be a Virginia resident?    Yes     No

5) Current Address:

Street Address	City	State	Zip

Have you lived at your current address for less than two years?      Yes     No

If you have lived at your current address for less than two years, please provide information for your previous addresses.

From (mo/yr)	To (mo/yr)	Street Address	City	State	Zip

6) Do you provide more than half of the financial support for the applicant or claim the applicant as a dependent on your federal and Virginia income tax returns?      Yes     No

7) a. For the 12 months prior to the term in which your dependent will enroll, will you have filed a Virginia income tax return or paid income tax on all earned income?      Yes     No

b. Are you exempt from filing and income tax return?      Yes     No

If no, where did you file a tax return or pay income taxes? \_\_\_\_\_

- 8) For the 12 months prior to the term in which your dependent will enroll, have you:
- a. been a registered voter in Virginia? Yes  No
- b. held a valid Virginia driver's license or Virginia ID card? Yes  No
- c. if you own a motor vehicle, had your motor vehicle registered in Virginia? Yes  No
- 9) Are you an active duty member of the U.S. armed forces? Yes  No

If no, skip to Question 10.

- a. Are Virginia income taxes currently paid on all military income? Yes  No

If yes, provide the Office of Admissions with copies of the following documentation: state and federal income taxes and current pay stub.

- b. Is the person who completed Part A of this form your dependent? Yes  No
- c. Are you residing in Virginia with orders to a military base/installation/post in Virginia or a contiguous state? Yes  No

If yes to question 9b and 9c, provide the Office of Admissions with copies of military orders, the dependent ID card, and lease/deed. Deadline is the end of Add Period.

- 10) Are you a retired military member, who currently resides in VA and resided in VA at the time of your retirement? Yes  No

If yes, do you claim the applicant as a dependent for federal and Virginia income tax purposes? Yes  No

If yes, provide the Office of Admissions with copies of your military orders, LES or State of Legal Residence Certificate showing Virginia as your state of legal residence for income tax purposes, any retirement paperwork, current Virginia driver's license and vehicle registration.

- 11) Within the last year have you lived outside of VA but worked in VA and earned at least the equivalent of a full-time minimum wages salary, and paid income taxes to Virginia during the last 12 months? Yes  No

If yes, will you have claimed the applicant as a dependent for federal and Virginia income tax purposes during the last 12 months? Yes  No

If yes, provide the Office of Admissions with copies of the following documentation: State and federal income taxes and current pay stub.

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

Signature of Parent, Spouse, or Legal Guardian \_\_\_\_\_ Date \_\_\_\_\_

Additional Comments:

Additional Information

*\*Domicile Administration is part of the Office of the Registrar.*

*\*\*If you have a status change pending, please provide Domicile Administration with a copy of your current & pending status documentation.*

*Please also provide a copy of this form.*