



This form must be completed to claim entitlement to Virginia in-state tuition rates pursuant to section 23.1-5, Code of Virginia. Answers must reflect information that is true for at least 1 year prior to term of enrollment.

If you are a currently attending Longwood student and are requesting a reclassification of your domicile status, please check here.

Student ID #

**SECTION I - To be completed by the STUDENT.**

- 1 Lancer's Name (Last, First Middle)
- 2 L Number      Date of Birth
- 3 Citizenship      U.S.      Non-U.S.      If not U.S., VISA type or Resident Alien #:
- 4 How long have you resided in VA?      Years      Months
- 5 Where have you lived for the past two years? List current address first. Include dates.

From (mm/yyyy) To (mm/yyyy) Full Address including city, state, and zip

**Please check all that apply to the student prior to the start of first semester.**

- 6 Are you an active duty member or veteran of the U.S. Armed Forces?
- 7 Are you married?
- 8 Are you a ward of the court, or were you a ward of the court until age 18?
- 9 Are both of your parents deceased and you have no legal guardian?
- 10 Are you 24 years old or older?
- 11 Are you a graduate or post-baccalaureate student?

*If you (student) selected any of these, you may be considered an Independent student and will complete Section II with your information. If your parents/legal guardian/spouse provides 51% or more of your financial support, or if you wish to be considered a dependent student, Section II will be completed by your parents/legal guardian/spouse only.*

**SECTION II - Independent Student, Parent, Legal Guardian, or Spouse**

- 1 Parent/Guardian/Spouse Name (Last, First, Middle)
- If Independent student skip to #6**
- 2 Relationship to the Student?      Father      Mother      Legal guardian
- 3 Citizenship      U.S.      Non-U.S.      If not U.S., VISA type or Resident Alien #:
- 4 How long have you resided in Virginia?      Years      Months
- 5 Where have you lived for the past two years? List current address first. Include dates.

From (mm/yyyy) To (mm/yyyy) Full Address including city, state, and zip

**For at least one year prior to student's first semester at Longwood, will you have:**

- 6 Filed a tax return or paid Virginia income taxes on all earned income?      Yes      No
- 7 Filed a tax return or paid taxes in **ANOTHER** state?      Yes      No
- 8 Are you registered to vote in Virginia?      Yes      No, registered in another state.      I am not registered to vote.
- 9 Do you hold a valid Virginia driver's license, learner's permit or DMV-issued ID? Date issued      Yes      No, but I do for another state.      I do not have either.
- 10 Owned or operated a motor vehicle with Virginia license plates?      Yes      No, but I do for another state.      I do not own or operate.
- 11 Do you live outside the state and commute to a work site in Virginia?  
A. Earned at least \$15,080 in the past year?      Yes      No      Yes      No

**SECTION III - Military Students or Families**

- 12 Are you or spouse an active duty member or veteran of the U.S. Armed Forces?      Me      My Spouse
- A. If you are a Veteran, what is your date of retirement or discharge?      / /
- B. Do you have military orders to a duty station in Virginia? (If yes, please provide copy.)      Yes      No
- C. If Virginia is your Home of Record, do you have temporary orders outside of Virginia? (If Yes, please provide copy.)      Yes      No
- D. Will the student use any military education benefits?      Yes      No
- E. Have you paid income taxes to Virginia on all military income for the last year?      Yes      No
- F. Is Virginia the military person's State of Legal Residence? (If yes, please provide copy of the Leave/Earnings statement)      Yes      No

**SECTION IV: Certification and Signature(s)**

I certify that all of the information I provided in this application is true and accurate. I understand that this application is a legally binding document and that if I provide fraudulent information, I may be subject to repayment of tuition or dismissal. I agree to furnish the University with supporting documentation related to my application if I am requested to do so.

Student Signature:

By checking this box and typing my full name below, I electronically sign this form.

Date