Application for Admission

Post-baccalaureate Certificate Programs

Office of Undergraduate Admissions • Monroe Park Campus • P.O. Box 842526 • Richmond, VA 23284-2526

Review your program's requirements on the departmental Web site and in the university Bulletin. Read all instructions in the application materials before completing. Type or print legibly in ink. Please complete all application items, including your college transcripts, and return to the above address. This application is for use by U.S. citizens and permanent resident aliens only. Nonimmigrants should request an international application. **Please include a check or money order payable to VCU for $40 (nonrefundable application fee).**

Office use only

N
$40
CH
MO
INI ___

School

Major

Year/Term

Req. Rule

Residency
R N NF

Class

Native Language
E O

City/County

National Origin
US or PR

Country of Citizenship

Name _____
last first middle initial former/maiden name

Social Security number ___ ___ ___ – ___ ___ – ___ ___ ___ ___ (Please note, while this information is not required for admission consideration, it is necessary for applicants who wish to be considered for financial aid and Hope Scholarship/Lifetime Learning tax credit to provide a Social Security number to the university. To protect your privacy, your Social Security number will not be used as your student identification number.)

Program of study (choose one)
- ❏ Post-baccalaureate certificate program in computer science
- ❏ Post-baccalaureate certificate program in statistics

Year of entry
Fall 20 ___ (recommended deadline May 1)
Spring 20 ___ (recommended deadline Nov. 1)

Residency All applicants must complete enclosed residency form.
Are you claiming Virginia residency? ❏ Yes ❏ No

Permanent mailing address Same as mailing address? ❏ Yes ❏ No

Address _____

City _____ State _____ ZIP code _____

Home telephone (_____) _____ – _____ Work telephone (_____) _____ – _____

E-mail _____ City or county of Virginia residency _____

Mailing address until _____ /_____ /_____
month day year

Address _____

City _____ State _____ ZIP code _____

Home telephone (_____) _____ – _____ Work telephone (_____) _____ – _____

Date of birth ___ /___ /___

Gender ❏ Male ❏ Female

Federal compliance information
(for federal reporting purposes only)

Ethnic background (select one or more as appropriate)
- ❏ American Indian or Alaskan Native
- ❏ Asian
- ❏ Black or African-American
- ❏ Hispanic or Latino
- ❏ Native Hawaiian or other Pacific Islander
- ❏ White/Caucasian

National origin
- ❏ U.S. citizen
- ❏ Permanent resident alien, political asylum or refugee

U.S. alien registration # _____
Date issued _____ /_____ /_____
month day year

Country of citizenship _____

Native language ❏ English ❏ Other

VCU

Virginia Commonwealth University

Academic history

Do you currently hold a bachelor's degree from an accredited four-year college or university in the U.S.? ❑ Yes ❑ No

Do you plan to graduate with a bachelor's degree within two semesters? ❑ Yes ❑ No

If you check No to both questions above, you are not eligible for the certificate program at this time.

Have you previously attended VCU? ❑ Yes ❑ No

If yes, as a ❑ Nondegree-seeking student ❑ Degree-seeking student

List all colleges and/or universities you have/are attending including VCU and any part-time, dual enrollment, nondegree, summer study and study abroad. List in order of attendance, beginning with the most recent. (Attach additional pages if necessary.)

Name of college or university Location (city, state)	Attendance dates from/to (month/year)	Total attempted credit hours	Degrees awarded or expected (include date)

Name of high school (or GED center)	Location (city, state)	Graduation date

Certification

I hereby certify that I have read the instructions for applying to VCU and that the information submitted by me on or with the application is complete and accurate. I also understand that falsification or failure to provide information requested may result in my immediate dismissal or loss of all credit from the university. My signature is my guarantee that, should I enroll, I agree to abide by all rules and policies, including the Honor System, of Virginia Commonwealth University. **Please note:** While you will work with academic advisers at VCU, submission of this application for admission serves as acknowledgment that you assume the responsibility for satisfying the university requirements for any VCU degree that you pursue.

Signature _____ Date _____

Your application will be returned if submitted without your: 1) signature and 2) application fee.

Information provided in this application may be shared with other state agencies as required by law.

Office of Undergraduate Admissions • Monroe Park Campus • P.O. Box 842526 • Richmond, VA 23284-2526 • (804) 828-1222 • Fax (804) 828-1899

an equal opportunity/affirmative action university

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Application for Virginia In-state Tuition

Office of Undergraduate Admissions • MCV Campus • P.O. Box 980632 • Richmond, Virginia 23298-0632

This form should be completed if you are claiming entitlement to Virginia in-state tuition pursuant to Section 23-7.4, Code of Virginia. Supporting documents and additional information may be requested. The completed form must accompany the Application for Undergraduate Admission.

For office use only.
Term
R N

Part I

1. Name _____
last first middle initial former/maiden name

2. Social Security number ___ ___ ___ – ___ ___ – ___ ___ ___ ___ 3. Date of birth ___ ___ / ___ ___ / ___ ___
(Please note, while this information is not required for admission consideration, it is necessary for applicants who wish to be considered for financial aid and Hope Scholarship/Lifetime Learning tax credit to provide a Social Security number to the university.) To protect your privacy, your Social Security number will not be used as your student identification number.

4. Citizenship ☐ U.S. ☐ Permanent resident alien, political asylum or refugee
☐ Non-U.S If non-U.S., give visa type _____

5. Marital status _____ 6. Name of parent/legal guardian or spouse _____

7. Permanent address of parent/legal guardian or spouse _____

8. Citizenship of parent/legal guardian or spouse ☐ U.S. ☐ Permanent resident alien, political asylum or refugee
☐ Non-U.S If non-U.S., give visa type _____

Part II – Section A: Student information

1. Where have you lived in the last two years? (List current address first. Include dates.)

Street address	City	State	ZIP code	From (MM/DD/YY)	To (MM/DD/YY)
				___ /___ /___	present
				___ /___ /___	___ /___ /___
				___ /___ /___	___ /___ /___

2. Do your parents/legal guardian provide 50 percent or more of your financial support or claim you as a tax dependent? ☐ Yes ☐ No

3. a. If you are married, do you wish to claim eligibility for in-state tuition rates based on your spouse's domicile? ☐ N/A ☐ Yes ☐ No

b. If "Yes," does your spouse provide more than 50 percent of your financial support? ☐ Yes ☐ No

4. Do any of the following characteristics apply to you? (Place a check mark beside all that apply.)

☐ Age 24 or older as of the first day of the semester in which you intend to enroll.
☐ Veteran or active duty member of the U.S. Armed Forces.
☐ Graduate student.
☐ Ward of the court or was a ward of the court until age 18.
☐ If both parents are deceased, no adoptive or legal guardian.
☐ Legal dependents other than a spouse.
☐ Independent student (attach federal and state tax forms).

Directions for completing the remainder of this application

If your response to No. 2 is "Yes," stop now and go to Section B. Complete both the unshaded and shaded areas of the remainder of this application, provide your parent/legal guardian's information in the shaded areas.

If your response to No. 3b is "Yes," stop now and go to Section B. Complete both the unshaded and shaded areas of the remainder of this application; provide your spouse's information in the shaded areas.

If your response to No. 3b is "No," stop now and go to Section B. Complete the unshaded areas of the remainder of this application.

If you are unmarried and did not check any of the items in No. 4, stop now and go to Section B. Complete both the unshaded and shaded areas of the remainder of this application; provide your parent/legal guardian's information in the shaded areas.

If you are unmarried and checked any of the items in No. 4 and answered "No" to No. 2, complete only the unshaded areas of the remainder of the application.

Part II – Section B: Domicile information

For the parent/legal guardian or spouse portion of this application, answer the questions about the parent upon whom you are dependent. **This parent/legal guardian must sign and date this application.** If you are claiming eligibility for in-state rates based on your spouse's domicile, you must answer the parent/legal guardian or spouse portion of this application about your spouse. **Your spouse must sign and date the application.**

5. Are you completing the shaded areas for your (check only one)
☐ Father ☐ Mother ☐ Legal guardian ☐ Spouse

VCU

Virginia Commonwealth University

Part II – Section B: Domicile information (cont.)

For questions 6-10, if your answer is "No" to question "a," then you must check the appropriate responses to question "b" either as "Student" or "Other" (i.e., parent, legal guardian or spouse).

	Student Yes	Student No	Parent, Legal Guardian or Spouse Yes	Parent, Legal Guardian or Spouse No
6. a. Have you been employed in Virginia for the past year?	☐	☐	☐	☐
b. If "No," were you employed in: Student: Another state ____ Not employed ____ Other: Another state ____ Not employed ____				
7. a. Was a tax return filed or income taxes paid to Virginia as a full- or part-year resident on all earned income for the year prior to the semester in which you will enroll?	☐	☐	☐	☐
b. If "No," were taxes paid to: Student: Another state ____ Did not file ____ Other: Another state ____ Did not file ____				
8. a. Are you a registered voter in Virginia?	☐	☐	☐	☐
b. If "No," are you registered to vote in: Student: Another state ____ Not registered ____ Other: Another state ____ Not registered ____				
9. a. Do you hold a valid Virginia driver's license?	☐	☐	☐	☐
b. If "No," do you hold a license in: Student: Another state ____ Not licensed ____ Other: Another state ____ Not licensed ____				
10. a. Did you operate a motor vehicle registered in Virginia during the last year?	☐	☐	☐	☐
b. If "No," is it registered in: Student: Another state ____ Not registered ____ Other: Another state ____ Not registered ____				

11. a. Are you a member of the U.S. Armed Forces ☐ Yes ☐ No
If "No," go to question No. 12.

b. Have income taxes been paid to Virginia on all military income for the last year? ☐ Yes ☐ No

If "No," have income taxes been paid to another state? ☐ Yes ☐ No

c. Does the current Leave/Earnings Statement reflect Virginia withholding? ☐ Yes ☐ No

If "Yes," effective date of change to Virginia: ____ /____ /____
Attach a copy of your LES and DD-2058.

12. a. Is your parent/legal guardian or spouse a member of the U.S. Armed Forces? ☐ Yes ☐ No
If "No," go to question No. 13.

b. Have income taxes been paid to Virginia on all military income for the last year? ☐ Yes ☐ No
If "No," have income taxes been paid to another state? ☐ Yes ☐ No

c. Does the current Leave/Earnings Statement reflect Virginia withholding? ☐ Yes ☐ No
If "Yes," effective date of change to Virginia: ____ / ____ / ____
Attach a copy of your LES and DD-2058.

d. Has your parent/legal guardian claimed you as a dependent for federal and state income taxes? ☐ Yes ☐ No

Section C: Additional information

13. If your spouse is in the military, will you have: ☐ Question 13 is not applicable
a. Resided in Virginia for the past year? ☐ Yes ☐ No
b. Been employed and earned at least $10,300 during the past year? ☐ Yes ☐ No
c. Paid income taxes to Virginia on all earned income? ☐ Yes ☐ No

14. If you have lived outside Virginia for the past year, will you have: ☐ Question 14 is not applicable
a. Been employed in Virginia and earned at least $10,300 during the past year? ☐ Yes ☐ No
b. Paid Virginia income taxes on all taxable income earned in Virginia during the past year? ☐ Yes ☐ No

15. If your parent/legal guardian is in the military, will the nonmilitary parent/legal guardian have: ☐ Question 15 is not applicable
a. Resided in Virginia for the past year? ☐ Yes ☐ No
b. Been employed and earned at least $10,300 during the past year? ☐ Yes ☐ No
c. Paid income taxes to Virginia on all earned income? ☐ Yes ☐ No
d. Claimed you as a dependent for federal and state income tax purposes? ☐ Yes ☐ No

16. If your parent/legal guardian has lived outside Virginia for the past year, will the parent/legal guardian have: ☐ Question 16 is not applicable
a. Been employed and earned at least $10,300 during the past year? ☐ Yes ☐ No
b. Paid Virginia income taxes on all taxable income earned in Virginia during the past year? ☐ Yes ☐ No
c. Claimed you as a dependent for federal and state income tax purposes? ☐ Yes ☐ No

Section D: Parent/legal guardian or spouse information

17. Where have you lived in the last two years? (List current address first. Include dates.)

Street address	City	State	ZIP code	From (MM/DD/YY)	To (MM/DD/YY)
				____ /____ /____	____ /____ /____
				____ /____ /____	____ /____ /____

Section E: 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.

_____ ____ /____ /____
Applicant's signature Date

_____ ____ /____ /____
Signature of parent/legal guardian or spouse (if required to furnish parent or spousal information) Date

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