# University of Mary Washington Appeal Procedure for Eligibility for In-State Tuition Charges



## Code of Virginia Information

Section 23-7.4 of the Code of Virginia, as amended, governs eligibility for in-state tuition charges. As a part of the statute, Paragraph A of Section 23-7.4:3 provides as follows:

Each public institution of higher education shall establish an appeals process for those students who are aggrieved by decisions regarding eligibility for in-state or reduced tuition charges pursuant to Sections 23-7.4 and 23-7.4:2. The Administrative Process Act (Section 9-6.14:1 et seq.) shall not apply to these administrative reviews. An initial determination shall be made. Each appeals process shall include an intermediate review of the initial determination and a final administrative review. The final administrative review shall be in writing. A copy of this decision shall be sent to the student. Either the intermediate review or the final administrative review shall be conducted by an appeals committee consisting of an odd number of members. No person who serves at one level of this appeals process shall be eligible to serve at any other level of this review. All such due process procedures shall be in writing and shall include time limitations in order to provide for orderly and timely resolutions of all disputes. Any party aggrieved by a final administrative decision shall have the right to review in the circuit court for the jurisdiction in which the relevant institution is located. A petition for review of the final administrative decision shall be filed within thirty days of receiving the written decision. In any such action, the institution shall forward the record to the court, whose function shall be only to determine whether the decision reached by the institution could reasonably be said, on the basis of the record, not to be arbitrary, capricious or otherwise contrary to law.

A complete copy of *Section 23-7.4* of the *Code of Virginia* is on file and available for review in the Reserve Section of Simpson Library. Information is also available online at the State Council for Higher Education in Virginia web site: **www.schev.edu**. Search using the keyword "domicile." At Mary Washington, the initial determination of eligibility for in-state tuition charges will be made on the basis of the information provided on the Virginia In-State Tuition Form, which has been completed by the applicant or, if appropriate, by the applicant and the applicant's parent or legal guardian. The initial determination is made at the time the application for undergraduate, graduate or nondegree course study is processed. If the information provided does not support the applicant's claim of eligibility for in-state tuition charges, the applicant will be classified as a non-Virginian, and notification of such decision will be made within ten (10) working days from the date the processing of the application is completed.

If the student or, where appropriate, the parent/legal guardian has additional information to support a claim of eligibility for in-state tuition charges, the student/parent/legal guardian must complete the Supplemental Application for Virginia In-State Tuition Rates, which can be found on the University web site: www.umw.edu. Search using the keywords "Student Accounts" and select "Forms" for a link to the Supplemental Application. The completed application with appropriate supporting documents should be forwarded to the chair of the Virginia In-State Tuition Committee, George Washington Hall, University of Mary Washington, 1301 College Avenue, Fredericksburg, Virginia 22401-5300. All supporting materials must be received by the committee chair before action can be taken at the intermediate level.

The University of Mary Washington's Virginia In-State Tuition Committee has three members: 1) the chair, who is the Vice President for Administration and Finance, 2) the Assistant Dean for Academic Services, and 3) the Dean of Admissions. After all supporting materials are received, the committee will review the information and render a decision within fifteen (15) working days. The decision of the committee will be in writing and will be sent to the student.

The student has fifteen (15) working days to appeal the intermediate decision for a final administrative review. All supporting information which was not previously submitted to the Virginia In-State Tuition Committee shall be forwarded to the President's Chief of Staff, George Washington Hall, University of Mary Washington, 1301 College Avenue, Fredericksburg, Virginia 22401-5300. The President's Chief of Staff will render a decision on the appeal within fifteen (15) working days, and notice of this decision will be made in writing to the student.

Any student currently enrolled at Mary Washington who wishes to seek a change of status of eligibility for instate tuition charges must complete the Supplemental Application for Virginia In-State Tuition Rates and follow the appeals process outlined above for the intermediate administrative review.

It should be noted that at every stage of the process, it is the responsibility of the student/parent/legal guardian to provide *clear and convincing evidence* of the claim. Clear and convincing evidence does not mean proof beyond a reasonable doubt as required in a court of law. However, it does mean that the evidence presented must conclusively support and justify the claim for eligibility for in-state status.

Should the student/parent/legal guardian wish to pursue further appeal after the final administrative review has been completed by the University, the appeal must follow the provisions in the *Code of Virginia* and must be made to the presiding judge of the 15th Judicial Circuit Court, 815 Princess Anne Street, Fredericksburg, Virginia 22401.

University of Mary Washington scholarships are awarded based on the amount of tuition you pay as an in state or out of state student. You may see a decrease, or possible recension, of your scholarships if your tuition status changes. If your residency appeal is approved, your account charges will be adjusted accordingly. If you have questions regarding changes to your Financial Aid Packages, you may call the Office of Financial Aid at 540-654-2468. If you have questions regarding your bill, please call 540-654-1250.

# Student Supplemental Application for Virginia In-State Tuition Rates

Date of Applie	cation		Banner ID N	Number					
Last Name			First Name			MI	Other Name	Used	
Current Addr	ess			State			Zip Code		
Permanent A	ddress ( <i>if differen</i>	t)							
City				State			Zip Code		
Home Phone	Number			Cell Ph	one Number				
Date of Birth			Marital Status		Sex				
Citizenship:	(a) Choose One	🔿 U.S. Citizen	Permanen	t Resident	O Political A	sylum/Refug	ee 🔿 Temp	oorary Visa	◯ Other
	(b) If you are not	t a U.S. Citizen, pl	ease specify: Co	ountry of Or	igin				
			Type of	Visa	Da	te of Issue	E	Expiration Dat	te
(1) Term at th	his institution for	which you are ap	plvina for Viraini	a Status:					
(1)	(a) If this applic		connection with	an applicati	ion for admission ions were filed:	to this institu	ition, please stat	e to which sc	hool(s) or
	Program				Date				
		ever previously b n during your last			te institution of h	igher learnin	g, please indicat	e your officia	l status
	Choose One	e 🔿 In State	Out-of-Sta	te					
	Institution					D	ate of Attendand	ce	
(2) Specify pe	riods during whi	ch you have resic	led in Virginia and	d addresses	at which you hav	e resided, be	eginning with yo	ur current ad	dress:
	om h/Year	To Month/Year				Address			

If residence in Virginia has not been continuous, please give reasons for absences:

(3) If you have lived outside of Virginia at any time during the last five years, specify periods during which you have resided outside Virginia and addresses at which you have resided:

From Month/Year	To Month/Year	Address

## (4) Employment: List any employment during the last three years:

Em	nployer	Hrs. / Wk	Address	From Mo/Yr	To Mo/Yr	Salary

## (5) Education: List ALL high schools, colleges, and universities attended; indicate classification (in-state or out-of-state) when appropriate.

School	From Mo/Yr	To Mo/Yr	Degree	Classification

#### (6) Attendance at this institution:

(a) Date of first or anticipated enrollment
(b) If your attendance has not been continuous, please explain
(c) Expected date of graduation (if applicable)

#### (7) Taxes:

	(a)	Have you paid a state income tax to ANY state during one or more of the last 3 years? O Yes O No
		If yes, to which state(s) and for what year(s)?
	(b)	If you filed in Virginia, did you file a resident or non-resident return for tax year prior to the date of alleged entitlement?
	(c)	State claimed for income tax purposes
(8)	Vot	ing:
	(a)	When and in what state did you last register to vote? Date  District  State
	(b)	When and in what state did you last to vote? Date State
	(b)	Select this box if you are not registered to vote. 🗌 Not registered to vote.
. ,		ver's License:
	(a)	Do you hold a valid Virginia driver's license? Yes No
	(b)	When were you first licensed in Virginia?  Date of Last Renewal
	(c)	If you do not have a Virginia driver's license, from which state do you hold a driver's license?
		Date Acquired Date of Last Renewal
	(d)	Select this box if you do not hold a driver's license. 🦳 No driver's license.

# (10) Motor Vehicle Registration

(a)	Do you operate a motor vehicle	e? O Yes O No	
(b)	In whose name is it registered?		
(c)	In what state is the vehicle reg	istered?	
	lf Virginia, when was it first reg	istered?	
	If registered in another state, sp	pecify: Registration Date	Last Renewal Date
(11) Do	you own real property (land) in	any state? CYes CNo	
Lo	cation	Date of Purchase	
(12) Do	you have a checking or passboo	ok savings account? 🔿 Yes 🔿 No	
Lo	cation of Checking Account		Date Opened
Lo	cation of Savings Account		Date Opened
(13) Do	you receive any type of financia	al aid? 🔿 Yes 🔿 No	
(a)	If yes, specify the name of the l	ending institution and state:	
(b)	Did you have to claim legal resi	dence in that state to qualify for any of these a	awards? () Yes () No
	If yes, where was the state of the	ne award?	Month/Year of Award
(14) Pa	rent's or Legal Guardian's Domic	ile:	
(a)	Your parent's/legal guardian's o	domicile (permanent address):	
	How long has he/she been so d	omicilied?	
(b)	Will you be claimed as a tax dep tax year prior to the date of alle	pendent on your parent's or legal guardian's in ged entitlement?	come tax return for the Yes No
(c)		ians provide you with over half of your financi	
	If the answers to b and c above	ve are no, please document your means of f	inancial support.
(15) Mi	litary Service		
		ed upon your military parent or spouse? 🦳 Ƴ	es 🔿 No 🔿 Not Applicable
	Are you a member of the armed		
	•	ent are in the military, please provide the follo	wing information:
		Applicant	Parent / Spouse
(1)	Date of Entering Service		
	Home of Record on Entering		
(3)	Changes in Home of Record (dates and states)		
(4)	Duty Station		
(5)	Expected Date of Discharge		
(6)	State Currently Claimed for Tax Purposes (date)		
(7)	State where you last paid tax on your military income		

(16)	Are you claiming entitlement to a special tuition rate as the employee of an agency or institution that has a spcial arranement contract with
	this institution?

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(17)	When a	nd whv	did	you initially	/ move to	Virginia?
( ' ' )	which u	inca vviriy	ana	you mittui		virginiu.

(18) Do you presently have the intention of remaining indefinitely in Virginia? OYes ONo

If yes, please set forth below, or in a cover letter, any additional factors, including social or economic ties to Virginia, which you believe should be considered on determining whether you have been a Virginia domiciliary for twelve months prior to the date of alleged entitlement:

19) Have you accepted an offer of employment with a Virginia employer? $\bigcirc$ Yes $\bigcirc$ No				
Name and Address of Employer				

I hereby certify that the information given is true and accurate. I also understand that if I provide erroneous information in an attempt to evade payment of out-of-state fees for each term attended and I may be subject to dismissal from the institution.

Signature

Date

## Spouse or Parent or Legal Guardian Supplemental Application for Virginia In-State Tuition Rates

**Instructions:** This form is a request for parental information to support an applicant's claim to Virginia domiciliary status. If applicant will be claimed as a tax dependent or will be substantially supported by his parent on the first day of the term in which he/she plans to enroll, his/her parent (or legal guardian) must complete the supporting application for Virginia status. The parent who is supporting the applicant or upon whom the applicant is dependent must fill out this form. Without this information, it will be impossible to determine whether the applicant is eligible for in-state tuition rates according to the domiciliary requirement set forth in Section 23-7.4 of the Code of Virginia. The application must be submitted prior to the deadline for the term. Generally, it takes up to fifteen working days to process the application.

Name of Applicant
Date of Application Banner ID Number
(1) Name of Parent of Legal Guardian Relationship to Applicant
(2) Current Address
City State Zip Code
(3) Home Address ( <i>if different</i> )
City State Zip Code
(4) Home Phone Number Work Phone Number
(5) Citizenship:     (a) Choose One     U.S. Citizen     Permanent Resident     Political Asylum/Refugee     Temporary Visa     Other       (b) If you are not a U.S. Citizen, please specify:     Country of Origin
Type of Visa Date of Issue Expiration Date
(6) Have you been a legal domiciliary (permanent resident) of Virginia for the past 12 months? OYes ONo
If no, state of permanent residence
(7) Will the applicant be claimed as a dependent on your federal or state income tax return for the tas year prior to the date for which in-state tuition rates are sought? Yes No
(8) Will you provide over half of the applicant's financial support for the year prior to the date for which in-state tuition rates are sought? Yes No
If so, in what form(s) will you provide this support? (e.g., tuition, books, clothing, transportation, medical and dental cart, etc.
(9) If you are the applicant's guardian, is this by court decree? OYes ONo
(10) Is either of the applicant's parents deceased? OMother OFather ONeither
(11) The applicant's parents are: OMarried Separated Divorced Other
(12) List your address(es) for the two-year period preceding the term in which the applicant will enroll. List current address first:

From Month/Year	To Month/Year	Address

# (13) Employment information (for at least one year prior to the date for which in-state tuition rates are sought):

Self:

Employer	Hrs. / Wk	Address	From Mo/Yr	To Mo/Yr	Salary

Spouse:

spouse:					
Employer	Hrs. / Wk	Address	From Mo/Yr	To Mo/Yr	Salary
4) Did you file a state income tax i	eturn to Virginia fo	r income earned during the past two years? $\bigcirc$ Y	es 🔿 No	Years	
5) Did you file a state income tax t	o another state for	income earned during the past two years? $\bigcirc$ Y	es 🔿 No	Years	
6) Did you file your last state incor	ne tax return as a:	CResident ONon-Resident ODid Not File			
7) Are you registered to vote? 🔿	Yes 🔿 No				
(a) Where are you registered to	vote? City	Country		State	
(b) When did you register to vo	te? Month	Year			
(c) When and where did you la	st vote? Month	Year	State	e	
8) Do you have a valid Virginia dri	ver's license? OY	es 🔿 No			
(a) If you have a Virginia driver	's license, when wa	s it first issued? Month	Year		
(b) Have you had a driver's lice	nse from another s	tate within the last five years? $\bigcirc$ Yes $\bigcirc$ No			
If so, when was it issued?	Month	Year			
9) Do you operate a motor vehicle	e? CYes C No				
(a) In whose name is it registe	red?				
(b) In what state is it registere	d?				
(c) When was it first registered	l in the above-note	d state? Month Yea	ar		
0) Do you own real property (land	in any state?	Yes 🔿 No			
(a) If so, where is it: County		City State			
(c) When did you purchase it	Month	Year	]		
1) Location of checking and passb	ook/savings accour	nts and date account was opened:			
Location of Checking Account		Date Opened			

(22) If you have served in the military within the last five years, please provide the following information:

(a)	Date of Entering Service	
(b)	Initial Home of Record	
(c)	Changes in Your Home of Record (dates and states)	
(d)	Current Official Location	
(e)	Date of Discharge (expected)	

(23) Do you have an intention of remaining in Virginia indefinitely? OYes ONo

To support your answer to Question 23, please discuss your reasons for wanting to stay in or leave Virginia.

(24) You may set forth in a cover letter any further evidence of social or economic ties to Virginia which you believe should be considered in determining the applicant's status for payment of in-state tuition.

I hereby certify that the information given is true and accurate. I also understand that if I provide erroneous information in an attempt to evade payment of out-of-state fees, I shall be charged out-of-state fees for each term attended and I may be subject to dismissal from the institution.

Signature of Spouse or Parent

Signature of Legal Guardian

Date