



UNDERGRADUATE Application for Re-enrollment

Note: To be considered for in-state tuition, you must complete the Application for Virginia In-State Tuition Rates (second page)

To be completed by Undergraduate students who have missed two or more consecutive semesters at Mason.

G# or SSN: _____

Name: _____
Last First M.I. Previous Name

Address: _____
Street Apt #

City State Zip Code

Home Phone: _____ Day Phone: _____
(Your home phone number will be your official phone number of record at Mason)

Term of Re-enrollment: Fall _____ Spring _____ Summer _____
Year Year Year

Would you like to have your Patriot Web PIN reset to your month and date of birth? (MMDDYY) Yes or No

Please circle the appropriate answers to the following questions:

1. Were you on suspension when you left George Mason University? **Yes No**
2. Is your cumulative GPA less than 2.0? **Yes No**
3. Have more than 5 years passed since your last graded (including Withdrawals) semester? **Yes No**
4. Have you attended another college or university during your absence from George Mason University without permission from the Dean/Director of your school/college? (degree-seeking students only) **Yes No**
If yes, it is your responsibility to include an official transcript for all work with this application, or have it sent directly from each institution to the Office of Admissions.
5. Have you ever been academically dismissed from George Mason University? **Yes No**
6. Have you ever been convicted of a felony? **Yes No**
If yes, provide the date(s) of any conviction(s) and an explanation for each occurrence on a separate sheet of paper.
7. Have you ever been suspended or dismissed from a college/university for non-academic reasons? **Yes No**
If yes, provide an explanation for each occurrence on a separate sheet of paper.
8. Are you on F-1 or J-1 immigration status? **Yes No**

- **If you answered no to all of the questions above, your re-enrollment will be processed by the Registrar's Office.**
- **If you answered yes to questions 1 or 2, take this form to your Dean for approval, then submit it to the Registrar's Office for processing.**
- **If you answered yes to question 3, you MUST REAPPLY to Mason. [admissions.gmu.edu or call (703) 993-2400]**
- **If you answered yes to questions 4, 5, 6, 7 or 8, this application will be reviewed by the Admissions Office.**

Failure to provide complete, accurate, and true information may result in dis-enrollment from the University and a referral to the Dean of Students.

Dean's/Admissions Approval: _____ Date: _____

BIS and NURS majors, your Department Chairperson must approve this form before it is processed.

Department Chair permission

Date

I certify that all information given on this application is complete, correct, and true. I will read and accept responsibility for the George Mason University Honor Code if I am approved for re-enrollment or re-admission.

Signature: _____ Date: _____

Application for In-State Tuition Rates

Office of the Registrar, 4400 University Drive, MS 3D1, Fairfax, Virginia 22030 • 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*. **All questions must be answered.** 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. Name of Applicant _____

2. Student ID/GNumber _____ 3. Date of Birth _____

4. Citizenship Status U.S. Citizen Permanent Resident Non-U.S. Citizen, Nonpermanent Resident

Do you have a pending Permanent Resident status? Yes No If yes, please indicate your previous visa status _____

Indicate the type of visa you currently hold: _____ Award Date: _____ Expiration Date: _____

Provide the Office of the Registrar with a copy of your visa.

5. How long have you lived in Virginia? _____

6. Do you consider yourself to be a Virginia resident though you currently live outside of Virginia?.....Yes No

7. Where have you lived for the past two years? **List current address first:**

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

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

8. 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

9. If you are currently enrolled in a public college or university, please list the school: _____

Are you paying in-state tuition rates?.....Yes No

10. Do your parents, spouse, or legal guardian(s) provide more than half of your financial support or claim you as a dependent?

If yes, Section B must also be completed by parent, spouse, or legal guardian.Yes No

11. a. For the 12 months prior to the term in which you will enroll, will you have you 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? _____

12. 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?.....Yes No
- c. had your motor vehicle registered in Virginia?.....Yes No

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

If no, skip to Question 14.

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

If yes, provide the Office of the Registrar 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. If no, provide a copy of your military orders, ID card, and lease/deed.

14. Are you the dependent of a military parent, spouse, or legal guardian with military orders to VA who also resides in VA?Yes No

If yes, have the military member complete Section B (questions 1, 5, 9, and signature) and provide the Office of the Registrar with copies of the following documentation: military member's ID card, military dependent ID card, lease/deed, and military orders. Deadline for submissions: Last day of Add Period.

15. Are you currently not living in Virginia or any of the states that have reciprocal tax provisions with Virginia: MD, DC, PA, WV, or KY?.....Yes No

If yes, will you have worked in Virginia and earned at least \$11,200 and paid Virginia income taxes for the past 12 months?.....Yes No

If yes, provide the Office of the Registrar 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 Applicant _____ Date _____

Note: The Registration Services section of the Office of the Registrar makes an initial domicile decision based on the information provided on this form. All students classified by Registration Services as out of state for tuition purposes have the right to appeal. Review the following guidelines before beginning your appeal: registrar.gmu.edu/students/domicile/appeal.html.

Name: _____ Student ID/GNumber _____

Application for In-State Tuition Rates Section B - Parent, Legal Guardian or Spouse

1. Name of Parent, Legal Guardian or Spouse _____

2. Citizenship Status U.S. Citizen Permanent Resident Non-U.S. Citizen, Nonpermanent Resident

Do you have a pending Permanent Resident status? Yes No If yes, please indicate your previous visa status _____

Indicate the type of visa you currently hold: _____ Award Date: _____ Expiration Date: _____

Provide the Office of the Registrar with a copy of your visa.

3. How long have you lived in Virginia? _____

4. Do you consider yourself to be a Virginia resident though you currently live outside of Virginia?.....Yes No

5. Where have you lived for the past two years? **List current address first:**

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

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 you 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? _____

8. For the 12 months prior to the term in which your dependent will enroll, will you have:
a. been a registered voter in Virginia?.....Yes No

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

c. had your motor vehicle registered in Virginia?.....Yes No

9. Are you an active duty member of the U.S. armed forces? If no, skip to Question 10.....Yes No
a. Are Virginia income taxes currently paid on all military income?.....Yes No

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

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 you answered yes to questions 9b and 9c, provide the Office of the Registrar with copies of military orders, the dependent ID card, and lease/deed. Deadline: End of Add Period.

10. Are you currently not living in Virginia or any of the states that have reciprocal tax provisions with Virginia: MD, DC, PA, WV, or KY?.....Yes No

If yes, will you have worked in Virginia and earned at least \$11,200 and paid Virginia income taxes for the past 12 months?.....Yes No

If yes, provide the Office of the Registrar with copies of the following documentation: state and federal income taxes, current pay stub, and a copy of this form.

I certify that the information I have provided is true.

Signature of Parent, Spouse, or Legal Guardian _____ Date _____