PERMISSION TO REGISTER FOR UNDERGRADUATE COURSES
105 Heth Hall | PO Box 6904 | Radford, VA 24142 | Telephone: 540-831-5271 | Fax: 540-831-6642

This form is designed for students who have not attended RU as an undergraduate student and want to enroll in undergraduate courses (courses listed in the undergraduate catalog/numbered 400 and lower) without being admitted as a degree candidate. (Students may register for a maximum of 24 semester hours as a non-degree seeking student.)

Complete this form and submit to: Radford University Registrar’s Office P.O. Box 6904, Radford, VA 24142

GENERAL INFORMATION

First Name: ____________________________ Middle Name: ____________________________ Last Name: ____________________________ Preferred Name: ____________________________

Address:

STREET ADDRESS ________________ CITY ___________________ STATE __________ ZIP CODE ________________

Telephone: ____________________________ Social Security Number: ____________________________ Date of Birth: ____________________________ (mm/dd/yy)

Email Address: ____________________________ RU Employee: ☐ Yes ☐ No

Year and semester you plan to attend:

Year ____________________________

☐ Fall ☐ Wintermester

☐ Spring ☐ Maymester

☐ Summer I ☐ Summer II

☐ Summer III ☐ Augustmester

Classification:

☐ College Student taking classes while enrolled at another institution (Letter of good standing or transcripts from all previous and current institutions reflecting at least a 2.0 cumulative GPA required)

☐ Working towards Certificate: ____________________________ (please include name of certificate program)

☐ Special non-degree (Letter of good standing or transcripts from all previous schools including last course work attempted reflecting at least a 2.0 cumulative GPA)

☐ High school student (Must submit a letter of permission from high school)

ENROLLMENT INFORMATION

Have you ever applied to RU? ☐ Yes ☐ No If yes, when? ____________________________

High School you attend(ed): ____________________________ Graduation Date: ____________________________

Have you attempted any college coursework? ☐ Yes ☐ No If yes, list school(s), attendance dates, and any degrees earned:

________________________________________________________________________________________

________________________________________________________________________________________

BIOGRAPHICAL INFORMATION

*TO MEET REQUIREMENTS OF FEDERAL REGULATIONS, THIS INFORMATION IS REQUESTED FOR RECORD KEEPING PURPOSES ONLY. THIS INFORMATION WILL IN NO WAY IMPACT DECISIONS

Race/Ethnic Background:

☐ Hispanic of any race

☐ American Indian or Alaskan Native

☐ Asian

☐ Black or African American

☐ Native Hawaiian or Pacific Islander

☐ White, Caucasian

☐ Two or more races

☐ Refuse to Disclose

Gender: ☐ Male ☐ Female

Marital Status: ☐ Single ☐ Married

☐ Separated ☐ Widowed

☐ Divorced

Citizenship:

☐ U.S. Citizenship

☐ Permanent Resident Alien

Alien Registration #: ____________________________ (Attach a copy of Green Card)

☐ Non-Resident Alien

Immigration Type: ____________________________

HONOR CODE

Have you ever been convicted of, or are currently being charged with, a criminal offense other than minor traffic violations? ☐ Yes ☐ No

* If yes, please explain on a separate sheet.

Have you ever been placed on disciplinary probation, declared ineligible to register for any period of time, suspended, or dismissed from any high school, college, or university? ☐ Yes ☐ No

* If yes, please give name of institution, date of action, and fully explain on a separate sheet.

By my signature, I certify all information supplied on this form is correct and I understand that falsification of information may result in termination of my course registration.

SIGNATURE: ____________________________ DATE: ____________________________

IMPORTANT: To be considered for in-state tuition, you must submit the attached Application for Virginia In-State Tuition Rates.
APPLICATION FOR VIRGINIA IN-STATE TUITION RATES

Eligibility for in-state tuition is pursuant to Section 23-7.4, Code of Virginia. Failure to complete and return this form to the university will result in an out-of-state classification for tuition purposes. Please contact the Registrar’s Office if you have any questions.

SECTION A: TO BE COMPLETED BY STUDENT

1. Name: ___________________________________________________________________________ SSN ______-_______-_______
   (Print full name) Last           First    Middle

2. How long have you lived in Virginia? ___________________________________________________________________________

3. Citizenship:  ☐ U.S.  ☐ Non-U.S.  ☐ Permanent Resident (Please attach a copy of your green card)
   Date of VISA issue: ___/___/____ Date of VISA: ___/___/____ VISA type ______________

4. Where have you lived for the past two years? (List current address first)

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<th>From (mo/yr) To (mo/yr)</th>
<th>Street Address</th>
<th>City</th>
<th>State</th>
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5.  
   a. Do your parents or legal guardian provide over half your financial support or claim you as a tax dependent?
      ☐ No    ☐ Yes   **If yes, Section B must be completed by your parent or legal guardian.**
   b. If you are married, do you want to claim eligibility for in-state tuition on your spouse’s domicile?
      ☐ No    ☐ Yes   **If yes, Section B must be completed by your spouse.**

6. **If you are under the age of 24, Section B must be completed** by your parent or legal guardian (court appointed). Place a check mark beside any that apply to you:
   ☐ Veteran of active duty member of the US Armed Forces
   ☐ Graduate/first professional student
   ☐ Married
   ☐ Have legal dependents other than spouse
   ☐ Both parents deceased, no adoptive or legal guardian
   ☐ Ward of the court until age 18 *(Court documentation required)*

7. Will you have filed a tax return or paid income taxes to any state other than Virginia?    ☐ No    ☐ Yes

8. For the entire twelve months prior to the term in which you enroll, will you have:
   a. filed a tax return or paid income taxes to Virginia on all earned income?   ☐ No    ☐ Yes
   b. been a registered voter in Virginia? ☐ No    ☐ Yes
   c. held a valid Virginia driver’s license? ☐ No    ☐ Yes   **If yes, date issued: ___/___/____**
   d. owned or operated a motor vehicle registered in Virginia? ☐ No    ☐ Yes

9. Are you or any member of your family presently on active duty? If No, go to question 10.    ☐ No    ☐ Yes
   a. Will Virginia income taxes have been paid on all military income for the twelve months prior to the term you will enroll?  ☐ No    ☐ Yes
   b. Is Virginia listed on your leave and earnings statement (LES)?   ☐ No    ☐ Yes   **Please attach a copy of your current LES.**
10. Will you have lived outside Virginia, worked in Virginia, earned at least the equivalent of a full time wage salary, and paid Virginia income taxes on all taxable income earned in this Commonwealth for at least twelve months prior to the term in which you will enroll?

☐ No  ☐ Yes  If yes, please attach a copy of your current Virginia income tax forms.

SECTION B: PARENT, LEGAL GUARDIAN, OR SPOUSE

1. Name of parent, legal guardian, or spouse (Print Name) ____________________________________________________________

2. Relationship to applicant  ☐ Parent  ☐ Court appointed legal guardian  ☐ Spouse  (Court documents required)

3. Where have you lived for the past two years? (list current address first)

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4. For the entire twelve months prior to the requested enrollment term, will you have:
   a. been employed in Virginia?  ☐ No  ☐ Yes
   b. filed a tax return or paid income taxes to Virginia on all earned income?  ☐ No  ☐ Yes
   c. been a registered voter in Virginia?  ☐ No  ☐ Yes
   d. held a valid Virginia driver’s license?  ☐ No  ☐ Yes  If yes, date issued: ___/___/____
   e. owned or operated a motor vehicle registered in Virginia?  ☐ No  ☐ Yes

5. Are you presently in the military?  ☐ No  ☐ Yes
   a. Have income taxes been paid to Virginia on all military income for the past twelve months prior to the term in which the student will enroll?
      ☐ No  ☐ Yes
   b. Is Virginia listed on your leave and earnings statement (LES)?
      ☐ No  ☐ Yes  * Please attach a copy of your current LES.
   c. Are you assigned to a permanent duty station within Virginia, the District of Columbia, or a state contiguous to Virginia, AND reside in Virginia?
      ☐ No  ☐ Yes  * Please attach a copy of your military orders.

6. Answer this question only if you live outside Virginia but work in Virginia.

Will you have lived outside Virginia, worked in Virginia, earned at least the equivalent of a full time wage salary, and paid Virginia income taxes on all taxable income earned in this Commonwealth for at least twelve months prior to the term in which the student will enroll?

☐ No  ☐ Yes  If yes, please attach a copy of your current Virginia income tax forms.

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.

_________________________________________________________________________     _________________________________
Signature of Applicant               Date

_________________________________________________________________________     _________________________________
Signature of Parent/Legal Guardian or Spouse               Date

(if required to furnish parental or spouse information)