



# Application for Non-Degree Admission

## OFFICE OF ADMISSIONS

The University of Virginia's College at Wise  
One College Avenue • Wise Virginia 24293-4412

E-MAIL admissions@uvawise.edu  
PHONE (888)282-9324 (toll-free)  
(276)328-0102 (local)  
WEB www.uvawise.edu  
FAX (276)328-0251

### Personal Information

#### NAME *(Please print)*

FIRST \_\_\_\_\_ MIDDLE \_\_\_\_\_ LAST \_\_\_\_\_

PREFER TO BE CALLED \_\_\_\_\_ BIRTHDATE *(Month/Day/Year)* \_\_\_\_\_ GENDER MALE \_\_\_\_\_ FEMALE \_\_\_\_\_

SOCIAL SECURITY NUMBER *(For reporting purposes only)* \_\_\_\_\_

ARE YOU MARRIED? \_\_\_\_\_  YES \_\_\_\_\_  NO \_\_\_\_\_ IF YES, MAIDEN NAME? \_\_\_\_\_

#### HOME ADDRESS

MAILING ADDRESS *(Not physical address)* \_\_\_\_\_ APT. NO. \_\_\_\_\_

CITY/STATE \_\_\_\_\_ COUNTY \_\_\_\_\_ ZIP CODE \_\_\_\_\_

HOME PHONE *(Area code)* \_\_\_\_\_ CELL PHONE *(Area code)* \_\_\_\_\_

E-MAIL \_\_\_\_\_ I'M SCREEN NAME \_\_\_\_\_

#### EMPLOYMENT

COMPANY NAME \_\_\_\_\_ WORK PHONE *(Area code)* \_\_\_\_\_

HAVE YOU APPLIED FOR ADMISSION HERE PREVIOUSLY?  YES  NO If yes, when? *(Month/Year)* \_\_\_\_\_

HAVE YOU ATTENDED UVA-WISE BEFORE?  YES  NO If yes, when? *(Month/Year)* \_\_\_\_\_

DID YOU RECEIVE A DEGREE FROM UVA-WISE?  YES  NO If yes, check one:  B.A.  B.S.

WHEN DID YOU PLAN TO ENROLL?  FALL *(August)*  SPRING *(January)*  SUMMER SESSION I *(June)*  SUMMER SESSION II *(July)* YEAR: \_\_\_\_\_

WHICH CAMPUS DO YOU PLAN TO ATTEND? *(Transfer students only)*  WISE CAMPUS  ABINGDON CAMPUS  LEBANON CAMPUS

#### CITIZENSHIP STATUS

U.S. CITIZEN BY BIRTH  U.S. CITIZEN BY NATURALIZATION *(Provide documentation)*  NATURALIZATION PENDING *(Provide documentation)*

PERMANENT RESIDENT *(Please provide copy of both front and back of Form I-551 and attach)*  PERMANENT RESIDENCY PENDING *(Provide documentation)*

ALIEN *(01)* *(Please complete International Applicant Information Form.)* COUNTRY OF RESIDENCE \_\_\_\_\_ VISA TYPE \_\_\_\_\_

OTHER *(Provide documentation)* \_\_\_\_\_

RACE *(Optional for reporting purposes only)*

AFRICAN AMERICAN *(02)*  NATIVE AMERICAN *(03)*  ASIAN/PACIFIC ISLANDER *(04)*  HISPANIC/LATINO *(05)*  CAUCASIAN *(06)*  OTHER/UNKNOWN *(07)*

#### Legal Disclosure

HAVE YOU EVER BEEN CONVICTED OF A CRIMINAL OFFENSE OTHER THAN A MINOR TRAFFIC VIOLATION?  YES  NO  
If yes, please enclose an explanation. If you are charged with a criminal offense after you submit this application, notify the Office of Admissions in writing immediately.

HAVE YOU EVER BEEN SUSPENDED OR EXPELLED FROM ANY SCHOOL?  YES  NO  
If yes, please enclose an explanation. If you are suspended or expelled after submitting your application, notify the Office of Admissions immediately.

#### The Honor System

The Honor System, adopted by the college in 1956, is a form of student self-government under which all students pledge to cooperate in acting honestly and honorably. Specifically, the System rests on the premise that lying, cheating, and stealing are not tolerable within the College community. The Honor System is administered by an Honor court elected by the student body and composed of representatives from each class. It is grounded in the belief that students are honest and trustworthy. A violation of the System in an offense against the entire student body. A violation can result in dismissal from the college or imposition of an intermediate sanction. The College will automatically enforce any sanction imposed by the Honor Court on a student certified to be guilty of a breach of the Honor System.

I hereby apply for admission to the University of Virginia's College at Wise and certify that the information provided on this application is true to the best of my knowledge. I understand that omitting information or providing false information will result in denial or dismissal from the College. If accepted, I agree to comply with and be governed by all the rules and regulations of the College. I further agree to subscribe to the Honor system administered by the student body.

APPLICANT'S SIGNATURE *(required for admission)* \_\_\_\_\_ DATE \_\_\_\_\_

Information provided on this application may be sent to the Virginia State police and other state and federal agencies as required by law.

*In accordance with federal law, the law of the commonwealth of Virginia, and the policies of the Rector of visitors of the University of Virginia, the College does not discriminate in any of its programs, procedures, or practices against any person on the basis of age, citizenship, color, handicap, sex, sexual orientation, or status as a disabled veteran or veteran of the Vietnam era. The College operates equal opportunity and affirmative action programs for faculty, staff, and students. The Equal Opportunity/Affirmative Action Office (EO/AA) is responsible for the enforcement of the College's nondiscrimination obligations. An applicant for admission or employment or any student or employee may file a discrimination complaint with the EO/AA Officer, the University of Virginia's College at Wise, One College Avenue, Wise, VA 24293.*



# Application for Virginia's In-state Tuition Privileges

**Attention Virginia Residents:** Complete and sign this form to claim in-state privileges, pursuant to Section 23-7.4 Code of Virginia. If you do not complete and return this form, you will be classified as a "non-Virginian" for the purposes of admission and tuition.

Please answer all of the questions below. If you are under the age of 19 or are considered a dependent, your parent, spouse, or legal guardian must complete Sections B and C.

## Section A (To be completed by all applicants.)

### APPLICANT'S INFORMATION (Please print.)

FIRST \_\_\_\_\_ MIDDLE \_\_\_\_\_ LAST \_\_\_\_\_

SOCIAL SECURITY NUMBER \_\_\_\_\_ BIRTH DATE (Month/Day/Year) \_\_\_\_\_ GENDER  MALE  FEMALE

DAYTIME PHONE (Area code) \_\_\_\_\_ E-MAIL ADDRESS \_\_\_\_\_

**CITIZENSHIP STATUS**  U.S. CITIZEN BY BIRTH  U.S. CITIZEN BY NATURALIZATION (Provide documentation)  NATURALIZATION PENDING (Provide documentation)  
 PERMANENT RESIDENT (Please provide copy of both front and back of Form I-551 and attach.)  PERMANENT RESIDENCY PENDING (Provide documentation)  
 ALIEN (O1) (Please complete International Applicant Information Form.) COUNTRY OF RESIDENCE \_\_\_\_\_ VISA TYPE \_\_\_\_\_  
 OTHER (Provide documentation) \_\_\_\_\_

## Section B (To be completed by the parent, spouse, or legal guardian of financially dependent applicants. If the applicant's parents are divorced or separated, the parent living in Virginia must complete sections B and C of this form. If the applicant is financially independent, please complete Section C.)

### PARENT'S, SPOUSE'S, OR LEGAL GUARDIAN'S INFORMATION (Please print.)

FIRST \_\_\_\_\_ MIDDLE \_\_\_\_\_ LAST \_\_\_\_\_

RELATIONSHIP TO APPLICANT \_\_\_\_\_ MARITAL STATUS \_\_\_\_\_

DAYTIME PHONE (Area code) \_\_\_\_\_ E-MAIL ADDRESS \_\_\_\_\_

**CITIZENSHIP STATUS**  U.S. CITIZEN BY BIRTH  U.S. CITIZEN BY NATURALIZATION (Provide documentation)  NATURALIZATION PENDING (Provide documentation)  
 PERMANENT RESIDENT (Please provide copy of both front and back of Form I-551 and attach.)  PERMANENT RESIDENCY PENDING (Provide documentation)  
 ALIEN (O1) (Please complete International Applicant Information Form.) COUNTRY OF RESIDENCE \_\_\_\_\_ VISA TYPE \_\_\_\_\_  
 OTHER (Provide documentation) \_\_\_\_\_

**WILL YOU HAVE PROVIDED OVER HALF OF THE APPLICANT'S FINANCIAL SUPPORT FOR AT LEAST ONE YEAR PRIOR TO THE TERM IN WHICH THE APPLICANT WILL ENROLL?**  YES  NO (If yes, parents must complete Section C and reverse. If no, applicant must complete Section C and reverse.)

**WILL YOU HAVE CLAIMED THE APPLICANT AS A DEPENDENT ON YOUR FEDERAL AND VIRGINIA INCOME TAX RETURNS FOR THE TAX YEAR PRIOR TO THE TERM IN WHICH THE APPLICANT WILL ENROLL?**  YES  NO

## Section C (To be completed by the applicant if financially independent or by the applicant's parent, spouse, or legal guardian if the applicant is financially dependent.)

**HOW LONG HAVE YOU LIVED IN VIRGINIA?** \_\_\_\_\_ YEARS \_\_\_\_\_ MONTHS

**WHERE YOU HAVE LIVED (IN THE SENSE OF PHYSICAL PRESENCE) IN THE LAST TWO YEARS? (No PO boxes.)**

CURRENT ADDRESS \_\_\_\_\_ CITY/STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_

FROM (Month/Year) \_\_\_\_\_ TO (Month/Year) \_\_\_\_\_

PREVIOUS ADDRESS \_\_\_\_\_ CITY/STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_

FROM (Month/Year) \_\_\_\_\_ TO (Month/Year) \_\_\_\_\_

**IF YOU HAVE NOT LIVED IN VIRGINIA WITHIN THE LAST TWO YEARS, HAVE YOU EVER LIVED IN VIRGINIA?**  YES  NO

If yes, from \_\_\_\_\_ to \_\_\_\_\_.

### EMPLOYMENT INFORMATION (FOR AT LEAST ONE YEAR PRIOR TO THE DATE FOR WHICH THE APPLICANT SEEKS IN-STATE PRIVILEGES).

CURRENT EMPLOYER \_\_\_\_\_ STREET ADDRESS \_\_\_\_\_ CITY/STATE \_\_\_\_\_

FROM (Month/Year) \_\_\_\_\_ TO (Month/Year) \_\_\_\_\_ HRS PER WEEK \_\_\_\_\_

PREVIOUS EMPLOYER \_\_\_\_\_ STREET ADDRESS \_\_\_\_\_ CITY/STATE \_\_\_\_\_

FROM (Month/Year) \_\_\_\_\_ TO (Month/Year) \_\_\_\_\_ HRS PER WEEK \_\_\_\_\_

CAREFULLY DETACH AT PERFORATION.

**WILL YOU HAVE FILED A TAX RETURN OR PAID INCOME TAX TO ANY STATE OTHER THAN VIRGINIA DURING THE PAST YEAR?**  YES  NO

If yes, name state and explain \_\_\_\_\_

**FOR AT LEAST ONE YEAR IMMEDIATELY PRIOR TO THE TERM IN WHICH THE APPLICANT WILL ENROLL, WILL YOU HAVE:**

A. Filed a resident tax return or paid resident taxes to Virginia on all earned income?  YES  NO

If no, please explain \_\_\_\_\_

B. Been a registered voter in Virginia?  YES  NO

If yes, date registered (Month/Year) \_\_\_\_\_

C. Held a valid Virginia driver's license?  YES  NO

If yes, date issued (Month/Year) \_\_\_\_\_

If no, please explain \_\_\_\_\_

**DO YOU OWN OR OPERATE A MOTOR VEHICLE?**  Yes  No

If yes, has it been registered in Virginia during all the past year?  Yes  No

If yes, date registered (Month/Year) \_\_\_\_\_

If no, please explain \_\_\_\_\_

**ANSWER THIS QUESTION ONLY IF YOU LIVE OUTSIDE VIRGINIA, BUT WORK IN VIRGINIA.**

Will you or your spouse have lived outside Virginia, been employed in Virginia, earned at least \$10,300 in Virginia, paid Virginia income taxes on all taxable income earned in this Commonwealth, and claimed the applicant as a dependent for federal and Virginia income tax purposes for at least one year immediately prior to the term in which the applicant will enroll?  YES  NO

If yes, please submit verification of employment, including dates and salary, and a copy of your most recent signed VA tax return (VA 760).

**ANSWER THIS QUESTION ONLY IF YOU ARE A MILITARY FAMILY.**

A. Are you or your spouse currently in the military?  YES  NO

If yes, check  SELF  SPOUSE

B. Are resident Virginia income taxes being paid on all military income?  YES  NO

If yes, as of what date? (MONTH/YEAR) \_\_\_\_\_ Where were you stationed on that date? (Military Base/City) \_\_\_\_\_

If yes, please submit a copy of a Leave and Earnings Statement reflecting Virginia withholding.

C. If the answer to B is no, will the applicant's nonmilitary parent have resided in Virginia, been employed and earned at least \$10,300, paid Virginia income taxes, and claimed the applicant as a dependent for federal and Virginia income tax purposes for at least one year immediately prior to the term in which the applicant will enroll?  YES  NO

If yes, please submit verification of employment, including dates and salary, and a copy of your most recent signed Virginia tax return (VA 760).

**PLEASE USE THE SPACE BELOW TO EXPLAIN ANY OF YOUR RESPONSES.**

I certify that the information I have provided above is true.

SIGNATURE OF APPLICANT \_\_\_\_\_

DATE \_\_\_\_\_

SIGNATURE OF PARENT, SPOUSE, OR LEGAL GUARDIAN \_\_\_\_\_

DATE \_\_\_\_\_

Please review your responses carefully before submitting this form. This information will be used to determine in-state/out-of-state classification. Incomplete or inaccurate information will delay the review of the application.