

UNIVERSITY OF MARY WASHINGTON

Appeal Procedure for Eligibility for In-State Tuition Charges

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 decision 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 Associate Vice President for Business and Finance, 2) the Vice President for Enrollment, Admissions and Financial Aid, and 3) the Vice President for Planning, Assessment and Institutional Research. 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 Executive Vice President, George Washington Hall, University of Mary Washington, 1301 College Avenue, Fredericksburg, Virginia 22401-5300. The Executive Vice President 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 in-state 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.

March 21, 2005

Student Supplemental Application For Virginia In-State Tuition Rates

Date of Application: _____ Social Security Number _____ - _____ - _____
(requested)

Full Name: _____
Last First MI (Other name used)

Current Address: _____

Permanent Address: _____
(If Different) _____

Telephone Number(s): Home() _____ Work() _____

Date of Birth: _____ Marital Status: _____ Sex: _____

Citizenship: (a) 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

1. Term at this institution for which you are applying for Virginia Status: _____

(a) If this application is made in connection with an application for admission to this institution, please state to which school(s) or programs you are applying and the date(s) your applications were filed:

Program: _____ Date: _____

(b) If you have ever previously been enrolled at a Virginia state institution of higher learning, please indicate your official status classification during your last term of enrollment:

Circle one: In State / Out-of-State Institution: _____

Date of Attendance: _____

2. Specify periods during which you have resided in Virginia and addresses at which you have resided, beginning with your current address:

From Month/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:

Employer	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? Yes 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?

Circle one - Resident / Non-Resident

- (c) State claimed for income tax purposes: _____

8. Voting:

- (a) When and in what state did you last register to vote? Date: _____ District: _____ State: _____

- (b) When and in what state did you last vote? Date: _____ State: _____

(c) Not registered to vote anywhere

9. Driver'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) No driver's license anywhere

10. Motor Vehicle Registration:

(a) Do you operate a motor vehicle? Yes No

(b) In whose name is it registered? _____

(c) In what state is the vehicle registered? _____

If Virginia, when was it first registered in Virginia? _____

If registered in another state, specify: Registration Date _____ Last Renewal Date _____

11. Do you own real property (land) in any state? Yes No

Location: _____ Date of Purchase: _____

12. Do you have a checking or passbook savings account? Yes No

Location of Checking Account: _____ Date Opened: _____

Location of Savings Account: _____ Date Opened: _____

13. Do you receive any type of financial aid? Yes No

(a) If yes, specify the name of the lending institution and state:

(b) Did you have to claim legal residence in that state to qualify for any of these awards? Yes No

If yes, please specify the state and the date of the award(s):

State: _____ Month: _____ Year: _____

14. Parent's or Legal Guardian's domicile:

(a) Your parent's/legal guardian's domicile (permanent address): _____

How long has he/she been so domiciled? _____

(b) Will you be claimed as a tax dependent on your parent's or legal guardian's income tax return for the tax year prior to the date of alleged entitlement? Yes No

(c) Did your parents or legal guardians provide you with over half of your financial support for the tax year prior to the date of alleged entitlement? Yes No

If the answers to b and c above are no, please document your means of financial support.

15. Military Service:

(a) Check One if Applicable: Are you claiming eligibility based upon your military parent or spouse? Yes No

(b) Are you a member of the armed forces? Yes No

(c) If you, your spouse, or your parent are in the military, please provide the following information:

	Applicant	Parent/Spouse
(1) Date of Entering Service	_____	_____
(2) 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 special arrangement contract with this institution?

Yes No Name of Employer: _____

17. When and why did you initially move to Virginia? _____

18. Do you presently have the intention of remaining indefinitely in Virginia? Yes No

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? Yes 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: _____ Social Security Number: _____ - _____ - _____
(requested)

1. Name of Parent or Legal Guardian: _____ Relationship to Applicant: _____

2. Current Address: _____
_____ Zip: _____

3. Home Address: _____
(if different) _____ Zip: _____

4. Telephone Number(s): Home () _____ Work () _____

5. Citizenship: (a) 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? Yes No

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 tax 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 care, etc.)

9. If you are the applicant's guardian, is this by court decree? Yes No

10. Is either of the applicant's parents deceased? Mother Father Neither

11. The applicant's parents are: Married 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):

Employer	Hrs./Wk.	Address	From Mo/Yr	To Mo/Yr	Salary
Self:					
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
Spouse:					
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

14. Did you file a state income tax return to Virginia for income earned during the past two years? Yes No Years _____

15. Did you file a state income tax to another state for income earned during the past two years? Yes No Years _____

16. Did you file your last state income tax return as a: Resident Non-Resident Did Not File

17. Are you registered to vote? Yes No

(a) Where are you registered to vote? City/County: _____ State: _____

(b) When did you register to vote? Month: _____ Year: _____

(c) When and where did you last vote? Month: _____ Year: _____ State: _____

18. Do you have a valid Virginia driver's license? Yes No

(a) If you have a Virginia driver's license, when was it first issued? Month: _____ Year: _____

(b) Have you had a driver's license from another state within the last five years? Yes No

If so, when was it issued? Month: _____ Year: _____

19. Do you operate a motor vehicle? Yes No

(a) In whose name is it registered? _____

(b) In what state is it registered? _____

(c) When was it first registered in the above-noted state? Month: _____ Year: _____

20. Do you own real property (land) in Virginia? Yes No

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