



The following residents may submit this form to request current out-of-state tuition/fee rates per credit hour be reduced to the current in-state tuition/fee rates per credit hour:

- Residents of Tennessee that live within 30 miles of Mountain Empire Community College
- Non-Virginia Residents that work in Virginia and file Virginia State Income Taxes

STUDENT NAME: _____ **EMPLID:** _____

MAILING ADDRESS: _____

CITY: _____ **STATE:** _____ **ZIP:** _____

PHONE: _____ **DATE OF BIRTH:** _____

Check all that apply to you:

- ☐ Age 24 or older
- ☐ Veteran or active-duty member of the U.S. Armed Forces
- ☐ Have legal dependents other than spouse
- ☐ Ward of the court or were a ward of the court until age 18
- ☐ Working on a master's or doctorate
- ☐ Married
- ☐ Both parents deceased, no adoptive or legal guardian

☐ For the last twelve months:

- I did not live in a home owned by a parent;
- and was not claimed as a dependent on parent's federal or state tax return (if filed);
- and did not receive more than 50% of my total support from parents;
- and earned at least the equivalent of a full-time wage salary.

(If you are completing this form based on your own information and you were unable to check any of the other boxes, you MUST attach a copy of your 2024 tax return or W2 indicating an annual income of at least \$14,500.)

If you checked any of the items above, please complete section **A** below. If you did not check at least one item above, please have your parent/legal guardian complete section **B** Below.

A. Applicant's Information	B. Parent/Legal Guardian's Information
1. Applicant's Name: _____ First Middle Last	1. Provide the name of the person upon whom you are basing your domicile: _____ First Middle Last

A. Applicant's Information	B. Parent/Legal Guardian's Information
2. Are you a U.S. Citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No", are you a permanent resident? <input type="checkbox"/> Yes <input type="checkbox"/> No If "Yes", what is your "A Number"? _____ If "No", what is your immigration status? _____	2. Using the above person's information, answer the questions below. Is the person above a U.S. Citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No" is he/she a permanent resident? <input type="checkbox"/> Yes <input type="checkbox"/> No If "Yes" what is his/her "A number"? _____ If "No" what is his/her immigration status? _____
3. Have you lived in Tennessee for the last 12 months? <input type="checkbox"/> Yes <input type="checkbox"/> No List any addresses for the last 24 months: From Date: _____ To Date: _____ Address: _____ From Date: _____ To Date: _____ Address: _____	3. Has the above person lived in Tennessee for the last 12 months? <input type="checkbox"/> Yes <input type="checkbox"/> No List any addresses for the last 24 months: From Date: _____ To Date: _____ Address: _____ From Date: _____ To Date: _____ Address: _____
4. For the past twelve months, have you lived out-of-state, worked in Virginia, and paid Virginia income taxes on at least \$14,500 of earned income? <input type="checkbox"/> Yes <input type="checkbox"/> No If "Yes", list state: _____	4. For the past twelve months, has the above person lived out-of-state, worked in Virginia, and paid Virginia income taxes on at least \$14,500 of earned income? <input type="checkbox"/> Yes <input type="checkbox"/> No If "Yes", list state: _____
5. For the past 12 months, have you: • Held a Virginia Driver's License or Virginia DMV ID? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No" have you held a Driver's License or DMV ID to any other state? <input type="checkbox"/> Yes (State: _____) <input type="checkbox"/> No • Owned or operated a motor vehicle registered in Virginia? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No" have you owned or operated a motor vehicle registered in any other state? <input type="checkbox"/> Yes (State: _____) <input type="checkbox"/> No • Been Registered to vote in Virginia? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No", have you been registered to vote in another state? <input type="checkbox"/> Yes (State: _____) <input type="checkbox"/> No	5. For the past 12 months, has the above person: • Held a Virginia Driver's License or Virginia DMV ID? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No" has the above person held a Driver's License or DMV ID to any other state? <input type="checkbox"/> Yes (State: _____) <input type="checkbox"/> No • Owned or operated a motor vehicle registered in Virginia? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No" has the above person owned or operated a motor vehicle registered in any other state? <input type="checkbox"/> Yes (State: _____) <input type="checkbox"/> No • Been Registered to vote in Virginia? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No", has the above person been registered to vote in another state? <input type="checkbox"/> Yes (State: _____) <input type="checkbox"/> No
6. Are you eligible to pay in-state tuition rates at state supported colleges in the current state of residence? <input type="checkbox"/> Yes <input type="checkbox"/> No	6. Are you eligible to pay in-state tuition rates at state supported colleges in the current state of residence? <input type="checkbox"/> Yes <input type="checkbox"/> No

I certify that all information is complete and accurate. If requested to do so, I agree to supply the College with supporting documentation related to this request for the Contract Tuition/Fee Rates.

Signature of Student

Date

Signature of Parent/Legal Guardian
(If completed by Parent/Legal Guardian)

Date

Office Use Only

ES: _____

Date: _____

Term: _____

Mileage: _____

☐ Approved ☐ Disapproved