

This form is required of those persons who wish to enroll in a graduate course at Virginia Tech and who are continuing students in a different graduate school. Such students are not required to submit transcripts. A \$25 application fee is required for processing. Please complete the Payment Processing Form and submit with this letter. This status is limited to one calendar year or 18 credit hours.

LAST/FAMILY NAME \_\_\_\_\_ FIRST/GIVEN NAME \_\_\_\_\_ MIDDLE NAME \_\_\_\_\_ SUFFIX \_\_\_\_\_

List any former names: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

Providing your SSN is optional, but is required of enrolled students for federal tax reporting. If you intend to apply for financial aid and scholarships or be employed on-campus, your SSN must be submitted.

Student ID Number: \_\_\_\_\_

Current Mailing Address \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

city \_\_\_\_\_ state \_\_\_\_\_ zip \_\_\_\_\_ country \_\_\_\_\_

Current Daytime Phone: \_\_\_\_\_  
 Home  Office  Mobile

Current Evening Phone: \_\_\_\_\_  
 Home  Office  Mobile

Please list your primary phone and e-mail. We value your privacy and will not disclose your information.

**Enrollment Information**

**Term of Enrollment**

FALL  SPRING  SUMMER I  SUMMER II \_\_\_\_\_  
 year

**Campus**

- BLACKSBURG (MAIN)
- HAMPTON ROADS
- NATIONAL CAPITAL REGION
- RICHMOND
- ROANOKE
- SOUTHWEST VIRGINIA
- VIRTUAL

E-mail Address: \_\_\_\_\_

TO BE COMPLETED BY THE APPLICANT

**Personal Information**

Gender:  Male  Female

Date of Birth: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ (MM/DD/YY)

City of Birth: \_\_\_\_\_

State of Birth: \_\_\_\_\_

Country of Birth: \_\_\_\_\_

*The U.S. Department of Education has requested that we collect the following information on race and ethnicity.*

*Please answer both of the following questions:*

**Are you Hispanic, Latino, or of Spanish Origin?**  Yes  No

**Please select your race: choose all that apply.**

- African American/Black
- American Indian/Alaskan Native
- Asian
- Native Hawaiian/Pacific Islander
- White

**Citizenship:**

- U.S. Citizen
- Permanent Resident (copy of PR Card required)  
 US State of Legal Residence: \_\_\_\_\_
- Non-U.S. Citizen (visa required)  
 Country of Citizenship: \_\_\_\_\_  
 Visa Status: \_\_\_\_\_

**Are you claiming entitlement to Virginia in-state tuition rates pursuant to Section 23.7-4, Code of Virginia?**

No  Yes *If yes, you must complete the Graduate In-State Tuition Request on page 4.*

**Course Selection**

I wish to take the following courses:

COURSE #	CRN #	COURSE TITLE	DEPARTMENTAL APPROVAL	CREDITS

**Pledge of Honor**

I certify that all information provided to the Graduate School and department on my application and during the entire admissions process is accurate. I understand that upon admission and enrollment I will be subject to the rules and regulations of the university, including the Graduate Honor System (<http://ghs.gradi.uhgvmtcc.vt.edu>).

APPLICANT SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

**Questions?** Call 540/231-8636 or e-mail [gradg@vt.edu](mailto:gradg@vt.edu) for assistance.

APPLICANT'S INSTITUTION

**Applicant's Institution to Complete**

The above is a graduate student in good standing in the following department:

College/University: \_\_\_\_\_

College/University URL: \_\_\_\_\_

College/University Address: \_\_\_\_\_

Degree: \_\_\_\_\_

Department/Program: \_\_\_\_\_

Current Overall GPA: \_\_\_\_\_

**Signatures Required**

COMMITTEE CHAIRPERSON signature	printed name	date
GRADUATE DEAN signature	printed name	date

Applicants, please obtain the required signatures from your institution and return your completed form to:

**Graduate School**  
Graduate Life Center at Donaldson Brown  
Virginia Tech (0325) • Blacksburg, VA 24061  
Fax: 540/231-2039

**Deadlines:**

<b>FALL</b>	Oct 15
<b>SPRING</b>	Mar 15
<b>SUMMER I</b>	May 15
<b>SUMMER II</b>	June 1

**Required Virginia Tech Signatures**

DEPARTMENT HEAD signature or authorized GRADUATE PROGRAM DIRECTOR	printed name	e-mail (@vt.edu, preferred)	date
DEPARTMENT CONTACT (GRADUATE STAFF COORDINATOR) signature			date
GRADUATE SCHOOL signature			date

VIRGINIA TECH APPROVALS

**Questions?** Call 540/231-8636 or e-mail [gradg@vt.edu](mailto:gradg@vt.edu) for assistance.

**Additional Required Information**

Have you been convicted of or received a juvenile adjudication for a violation of any local, state, or federal law, other than a minor traffic violation?  YES  NO

Are you currently on court-ordered supervised or unsupervised probation or under the terms of a finding under advisement?  YES  NO

Please give a full explanation of any past criminal convictions:

ADDITIONAL REQUIRED INFORMATION

**Return your completed form to:**  
**Graduate School Admissions**  
Graduate Life Center at Donaldson Brown  
Virginia Tech (0325)  
Blacksburg, VA 24061  
Fax: 540/231-2039  
Email: [grads@vt.edu](mailto:grads@vt.edu)

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

\_\_\_\_\_  
DATE

If you are being charged out-of-state tuition and believe you are eligible for in-state rates, please complete the following form. You must be a U. S. citizen; a permanent resident alien; or hold an A, E, G, H-1 or H-4, K, or N visa to establish residency that qualifies you for in-state tuition. Please attach a copy of your permanent resident alien card or I-94, visa stamp, and/or other USCIS approval notification. You must also demonstrate intent to establish domicile in Virginia. The university requires additional supporting documentation demonstrating your residency qualification for the prior year. Please include a copy of your Virginia state income taxes, driver's license, vehicle registration, voter registration, and lease/mortgage agreement. Failure to supply this information may result in the denial of your request. Use the other side of this form to provide additional information to be considered on your application.

PERSONAL INFO

LAST/FAMILY NAME FIRST/GIVEN NAME MIDDLE NAME SUFFIX
Student ID Number: if known
Date of Birth: month/day/year
E-mail Address: @vt.edu account, preferred
Daytime Phone: Home Office Mobile
Local Address
City state zip country

Citizenship
U.S. CITIZEN PERMANENT RESIDENT NON-U.S. CITIZEN\*
Current Program
Degree Level
DOCTORAL EDUCATION SPECIALIST MASTERS GRADUATE CERTIFICATE NON-DEGREE COMMONWEALTH CAMPUS
First Term of Enrollment
FALL SPRING SUMMER I SUMMER II year
Anticipated Completion Term
FALL SPRING SUMMER I SUMMER II year
Campus
BLACKSBURG HAMPTON ROADS NATIONAL CAPITAL REGION RICHMOND ROANOKE SOUTHWEST VIRGINIA VIRTUAL

How long have you resided in Virginia? Years: Months:
Beginning with the most recent, chronologically list the addresses at which you have resided for the past two years.
Prior Address 1: street address city state zip country
Prior Address 2: street address city state zip country

REQUIRED INFO

Do your parents/legal guardian/spouse provide over half of your financial support OR claim you as a dependent on their taxes?
If yes, in which state do your parents reside? (If VA, attach a copy of their VA state income taxes.)
For the twelve months prior to the term in which you will enroll, will you have:
1. filed a tax return or paid income taxes to Virginia?
2. been a registered voter in Virginia?
3. held a valid Virginia Driver's license?
4. owned or operated a vehicle?
5. Are you, or any member of your immediate family, enlisted in the Virginia National Guard?
6. Are you, the spouse of, or the dependent of active-duty military personnel?
7. If you are active duty military, did your spouse earn at least \$10,300 in the last year, claim you as a federal tax dependent, and pay income tax to the state of Virginia?
Answer this question, only if you worked in Virginia for the past 12 months but currently live outside of Virginia.
Did you file Virginia taxes on all income earned in Virginia for the last year?

SIGNATURE

APPLICANT SIGNATURE date

Return your completed form to: Graduate School, Graduate Life Center at Donaldson Brown Virginia Tech (0325) • Blacksburg, VA 24061 Fax: 540/231-2039

Questions? Call 540/231-8636 or e-mail grads@vt.edu for assistance.

Application and diploma reorder fees may be paid via check or money order. Please complete the information below and submit this document with the corresponding application or form to the Graduate School.

\_\_\_\_\_  
LAST/FAMILY NAME

\_\_\_\_\_  
FIRST/GIVEN NAME

\_\_\_\_\_  
MIDDLE NAME

\_\_\_\_\_  
SUFFIX

**Student ID Number:** \_\_\_\_\_  
if known

**E-mail Address:** \_\_\_\_\_  
@vt.edu account, preferred

**Daytime Phone:** \_\_\_\_\_  
 Home  Office  Mobile

REQUIRED INFO

**Please process payment for:**

- DEGREE-SEEKING APPLICATION FEE (I.E. MASTERS AND DOCTORAL STUDENTS) – \$75
- EXECUTIVE MASTERS OF BUSINESS ADMINISTRATION (EMBA) APPLICATION FEE – \$90
- APPLICATION FOR SIMULTANEOUS DEGREE – \$75
- NON-DEGREE-SEEKING APPLICATION FEE (I.E. COMMONWEALTH CAMPUS AND EXPEDITED NON-DEGREE PROGRAMS) – \$25
- APPLICATION FOR CERTIFICATE PROGRAM – \$25
- APPLICATION FOR READMISSION – \$25
- APPLICATION FOR VISITING STUDENT – \$25
- DIPLOMA REORDER – \$20 PER DIPLOMA

**To Pay Via Check or Money Order**

Enclose your check or money order made payable to *Treasurer, Virginia Tech*.  
Checks and money orders must be drawn from a U.S. bank.

SIGNATURE

\_\_\_\_\_  
STUDENT SIGNATURE

\_\_\_\_\_  
date

Return your completed form to:  
**Graduate School**  
Graduate Life Center  
at Donaldson Brown  
Virginia Tech (0325)  
Blacksburg, VA 24061  
Fax: 540/231-2039  
Email: [grads@vt.edu](mailto:grads@vt.edu)

**Questions?** Call 540/231-8636 or  
e-mail [grads@vt.edu](mailto:grads@vt.edu) for assistance.