

APPLICATION FOR VISITING GRADUATE STUDENT ADMISSION

Use this form if you are enrolled at a different institution and want to enroll in a graduate-level course at Virginia Tech. Transcripts are not required as part of this application. A \$25 application fee will be assessed to your Virginia Tech account and billed to you by the Office of the University Bursar. You will receive an admission decision letter by email upon processing of this form.

Last/Family Name	First/Given Name	Middle Name	Suffix
List any former names: _____			
Social Security Number: _____			
<small>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.</small>			
Current Mailing Address _____ _____ _____			
City	State	Zip	Country
Phone: _____			
E-mail Address: _____			

Enrollment Information

Term of Enrollment
FALL SPRING SUMMER Year _____

Campus
BLACKSBURG
HAMPTON ROADS
NATIONAL CAPITAL REGION
RICHMOND
ROANOKE
SOUTHWEST VIRGINIA
VIRTUAL

Gender: Male Female	<i>The U.S. Department of Education has requested that we collect the following information on race and ethnicity.</i>	Citizenship: U.S. Citizen Permanent Resident (copy of PR Card required) U.S. State of Legal Residence: _____ Non-U.S. Citizen (visa required) Country of Citizenship: _____ Visa Status: _____
Date of Birth: ____ / ____ / ____ (MM/DD/YY)	Are you Hispanic, Latino, or of Spanish Origin ? Yes No	Are you claiming entitlement to Virginia in-state tuition rates pursuant to Section 23.7-4, Code of Virginia? No Yes <i>If yes, you must complete the Graduate In-State Tuition Request on page 4.</i>
City of Birth: _____	Please select your race (choose all that apply): African American/Black American Indian/Alaskan Native Asian Native Hawaiian/Pacific Islander White	
State of Birth: _____		
Country of Birth: _____		

Course Selection

I wish to take the following courses:

COURSE #	CRN #	COURSE TITLE	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 (<https://graduateschool.vt.edu/academics/expectations/graduate-honor-system.html>).

STUDENT Signature

DATE (DD/MM/YY)

Submit your completed form:
<https://gs.vt.edu/forms>
120 Graduate Life Center, Blacksburg VT
ICAB 1, 3625 Potomac Ave, Alexandria
For assistance, call 540-231-8636 or
e-mail grads@vt.edu

VISITING GRADUATE STUDENT APPLICATION Continued

Applicant's Institution to Complete

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

Name

College/University:

College/University Address:

Degree:

Department/Program:

Current/Overall GPA:

GRADUATE ADVISOR Signature

Printed Name

Date (DD/MM/YY)

GRADUATE DEAN Signature

Printed Name

Date (DD/MM/YY)

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

120 Graduate Life Center, Blacksburg
VT ICAB 1, 3625 Potomac Ave, Alexandria
For assistance, call 540-231-8636 or
e-mail grads@vt.edu

Deadlines:

FALL	August 1
SPRING	January 1
SUMMER I	May 1

VT GRADUATE SCHOOL Signature

Date (DD/MM/YY)

IN-STATE TUITION REQUEST FOR VIRGINIA RESIDENTS

Use this form if you are eligible for in-state tuition rates based on being domiciled in Virginia. Supporting documentation demonstrating Virginia as your state of domicile is required with this form.

Last/Family Name	First/Given Name	Middle Name
Last 4 digits of VT ID: _____		
E-mail Address: _____ <small>@vt.edu account, preferred</small>	Citizenship U.S. Citizen Permanent Resident Non-U.S. Citizen* <i>*If non-U.S. citizen, please list your visa status:</i> _____	
Current Address: _____ _____ _____ City State Zip Country	Phone: _____	

Campus Blacksburg Hampton Roads National Capital Region Richmond Roanoke Southwest Virginia Virtual	Current Program: _____	Degree Level Doctoral Education Specialist Master's Graduate Certificate Non-Degree Commonwealth Campus
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		

Questions	Answers	Recommended Documentation to Submit If Selecting Yes
Do your parents/legal guardian/spouse provide over half of your financial support OR claim you as a dependent on their taxes?	Yes No	<ul style="list-style-type: none">First page of their state income taxesFirst page of their federal taxes listing you as a dependent
Are you a U.S. military veteran?	Yes No	<ul style="list-style-type: none">DD214First page of lease/mortgage agreement showing physical address and signature page of lease/mortgage agreement
Are you the spouse of or the dependent of active-duty U.S. military personnel?	Yes No	<ul style="list-style-type: none">Current military ordersFirst page of lease/mortgage agreement showing physical address and signature page of lease/mortgage agreementMilitary dependent card
If you answered NO to all questions above, for the 12 months prior to the term in which you are requesting in-state tuition rate, will you have:		
A lease or mortgage agreement for a residence in Virginia?	Yes No	<ul style="list-style-type: none">First page of lease/mortgage agreement showing physical address and signature page of lease/mortgage agreement
Filed a tax return or paid income taxes to Virginia?	Yes No	<ul style="list-style-type: none">First page of your most recent Virginia state income taxes
Held a valid Virginia driver's license or state issued ID card?	Yes No	<ul style="list-style-type: none">Virginia driver's license or state ID card
Been a registered voter in Virginia?	Yes No	<ul style="list-style-type: none">Virginia voter registration card
Owned or operated a registered vehicle?	Yes No	<ul style="list-style-type: none">Virginia vehicle registration

I hereby certify that all of the information provided on this form is true and accurate. I understand that my request for in-state tuition is a legally binding document and that if I provide fraudulent information, I may be subject to repayment of tuition and/or dismissal from the university. I agree to furnish the university with supporting documentation, if asked, related to my request in a timely manner. I realize that failure to supply additional information may result in a denial of my request.

STUDENT Signature _____

Date (DD/MM/YY) _____

Submit your completed form:

<https://gs.vt.edu/forms>

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