

Advisers...

Did you know that by attending today's regional championship you have the opportunity to earn graduate credit?

Though a very special arrangement with Virginia Commonwealth University's School of Mass Communications you can enroll in MASC 691 Advising Student Media and earn 1 hour of continuing education credit for a \$125 fee. Interested? Here's what you need to do.

- Complete both the registration and in-state tuition forms.
- Write a check payable to the VHSL.
- At the conclusion of the workshop prepare a one-page typewritten paper discussing what you learned that will help you in your role as a publications adviser. This paper should be submitted via email to Carol Mawyer no later than October 30.
- Mail both forms and your check for \$125 no later than October 1 to:

Carol B. Mawyer
Assistant Director of Student Services & Scholastic Journalism
Virginia Commonwealth University
PO Box 842034
Richmond, VA 23284-2034

- Academic credit will be awarded at the end of the Fall 2010 semester (usually in mid December.)
- You may obtain an official copy of your VCU academic transcript after grades have been posted in mid-December by contacting the VCU Registrar or by visiting this web site:

<http://www.vcu.edu/enroll/rar/transcripts.html>

Still have questions?

Contact Carol Mawyer at cbmawyer@vcu.edu. Subject Line: MASC 691.

VCU Off-campus Registration

Virginia Commonwealth University

Name

(current students check box if change of name)

Last	First	Middle
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Social Security number

			-						
--	--	--	---	--	--	--	--	--	--

Date of birth

		-			-		
(Month)	(Date)	(Year)					

Semester

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1=Spring
2=Summer
3=Fall

Year

--	--	--	--

Sex

Female Male

Permanent mailing address

(current students check box if change of address)

Street		
City	State	ZIP

E-mail address

--

Telephone number

Home	() -
Work	() -

Ethnic background (select one or more)

- B = Black, not of Hispanic origin
 H = Hispanic American
 I = American Indian/Native American
 O = Asian or Pacific Islander
 W = White, not of Hispanic origin
 X = Other
 N = Not Reported

Student's employer (if employed)

Agency name
Telephone () -

Please check "yes" or "no" for each statement below.

- Have you attended VCU in the past? Yes No
 Do you currently hold a college degree (bachelor or higher)? Yes No
 Are you registering for at least one graduate-level course (level 500 or above)? Yes No
 Are you a teacher enrolling for recertification purposes? Yes No

Call number	Subject	Course	Section	Credits	Title

Virginia Commonwealth University recognizes that honesty, truth and integrity are values central to its mission as an institution of higher education. The Honor Code is built on the idea that a person's honor is their most cherished attribute. A foundation of honor is essential to a community devoted to learning. Within this community, respect and harmony must coexist. The Honor Code is the policy of VCU that defines the highest standards of conduct in all academic affairs.

The fundamental beliefs that underlie and are reflected in the Honor Code are:

- that mutual trust is the positive force that makes an environment honorable,
- that the educational community should be free from the injustices caused by any form of intellectual dishonesty,
- that the honesty and integrity of all members of the VCU community contribute to the search for truth, and
- those who fail to live up to the stated expectations will be identified, sanctioned and educated as to the appropriate and expected behavior to exist within the VCU community.

I have read the above statement and agree to abide by the Honor System. I am requesting registration for the following courses listed above for academic credit.

Signature: _____ Date: _____

* Please note failure to complete all sections of this form may delay the processing of your registration request.

Nondegree-seeking Student Residency Form

Completion of this form is required by the commonwealth of Virginia if you are claiming entitlement to Virginia in-state tuition rates pursuant to Section 23-7.4 Code of Virginia. All questions must be answered. When not applicable, mark the N/A box. Section A must be completed by the applicant. Section B of this form must be completed by the spouse, parent or legal guardian if the applicant

is a dependent. Supporting documents and additional information may be requested. Return this form with your application for admission. If this form is not submitted, you will be classified as a non-Virginia resident. Please type.

Section A – Applicant

1. **Name** _____
last first mi other (last name)

2. **Social Security number** _____ 3. **Date of birth** _____ 4. **How long have you lived in Virginia?** _____

5. **Are you a U.S. citizen?** Yes No If no, what is your current immigration status? _____ Visa type? _____

6. **Where have you lived for the past two years?** List current address first:
From (month/year) To (month/year) Street address City State ZIP

- | | Yes | No | N/A | | Yes | No | N/A |
|--|--------------------------|--------------------------|--------------------------|---|--------------------------|--------------------------|--------------------------|
| 7. Does your parent, legal guardian or spouse provide over half of your financial support or claim you as a tax dependent? If yes, Section B must be completed by your parent, legal guardian or spouse. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 11. Are you or any other member of your immediate family presently in the military? If no, go to question 12. If yes, check: <input type="checkbox"/> Self <input type="checkbox"/> Spouse <input type="checkbox"/> Parent/legal guardian | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 8. Will you have filed a tax return or paid income taxes to any state other than Virginia during the past year? If yes, which state(s)? _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | a. Will Virginia income taxes have been paid on all military income for one year prior to the semester in which you will enroll? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 9. For at least one year prior to the semester in which you will enroll, will you have:
a. Filled a tax return or paid income taxes to Virginia on all earned income? <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
b. Been a registered voter in Virginia? <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
c. Held a Virginia driver's license? <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | b. Does the current Leave/Earnings Statement reflect Virginia withholding? If yes, effective date of change to Virginia: _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 10. Do you own or operate a motor vehicle? If yes, has it been registered in any state other than Virginia during the past year? <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | c. If your spouse is in the military, will you have resided in Virginia, been employed, earned at least \$10,300 and paid income taxes to Virginia for at least one year prior to the semester in which you will enroll? <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | | 12. Answer this question only if you have lived outside Virginia, but work in Virginia:
Will you have lived outside Virginia, but worked in Virginia, earned at least \$10,300 and paid Virginia income taxes on all taxable income earned in this commonwealth for at least one year prior to the semester in which you will enroll? <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

I certify under penalty of disciplinary action that the information that I have provided is true.

Signature of applicant _____ Date _____

Section B – Parent, legal guardian or spouse

If your parent, legal guardian or spouse provides over half of your financial support or claims you as a dependent, he/she must complete this section.

1. **Name of parent, legal guardian or spouse** _____
last first mi other (last name)

2. **Relationship to applicant** _____ 3. **Citizenship** U.S. Non-U.S. If non-U.S., visa type: _____ 4. **How long have you lived in Virginia?** _____

5. **Where have you lived for the past two years?** List current address first:
From (month/year) To (month/year) Street address City State ZIP

- | | Yes | No | N/A | | Yes | No | N/A |
|--|--------------------------|--------------------------|--------------------------|--|--------------------------|--------------------------|--------------------------|
| 6. Will you have filed a tax return or paid income taxes to any state other than Virginia during the past year? If yes, which state(s)? _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 11. Are you or any other member of your immediate family presently in the military? If no, go to question 12. If yes, check: <input type="checkbox"/> Self <input type="checkbox"/> Spouse | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. Will you have claimed the applicant as a dependent on your federal and Virginia income tax returns for the tax year prior to the semester in which the applicant will enroll? <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | a. Will Virginia income taxes have been paid on all military income for one year prior to the semester in which the applicant will enroll? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 8. Will you have provided over half of the applicant's financial support for at least one year prior to the semester in which the applicant will enroll? <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | b. Does the current Leave/Earnings Statement reflect Virginia withholding? If yes, effective date of change to Virginia: _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 9. For at least one year prior to the semester in which the applicant will enroll, will you have:
a. Filled a tax return or paid income taxes to Virginia on all earned income? <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
b. Been a registered voter in Virginia? <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
c. Held a Virginia driver's license? <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | c. If the answer to (a) 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 prior to the semester in which the applicant will enroll? <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 10. Do you own or operate a motor vehicle? If yes, has it been registered in any state other than Virginia during the past year? <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 12. Answer these questions only if you live outside Virginia, but work in Virginia:
a. Will you or your spouse have lived outside Virginia, but been employed in Virginia, earned at least \$10,300 and paid Virginia income taxes on all taxable income earned in this commonwealth for at least one year prior to the semester in which the applicant will enroll? <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | | b. If the answer to (a) is yes, will the parent, legal guardian or spouse employed in Virginia have claimed the applicant as a dependent for federal and Virginia income tax purposes for at least one year prior to the semester in which the applicant will enroll? <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

I certify under penalty of disciplinary action that the information that I have provided is true.

Signature of parent, legal guardian or spouse _____ Date _____