



**1. Student Information**

Name (Last, First MI)

Longwood ID or SS#

Email

Telephone

Home Address (Street / City / State / Zip)

Are you a US Citizen?

If No, Country?

Date of Birth

Marital Status

Ethnic Heritage

**2. High School Information**

High School Name

County / City

**3. Approval**

\_\_\_\_\_  
Student's Name

\_\_\_\_\_  
Date

**4. Submission**

To successfully register your student for the Economics/Personal Finance dual enrollment class at Longwood University for summer 2016 the following three forms must be completed and return to Ms. Suzanne Stetson and include 1) Economics/Personal Finance Dual Enrollment Application 2) Parent/Guardian agreement and 3) Application for Virginia in-state tuition.

Please email the completed forms to [registrar@longwood.edu](mailto:registrar@longwood.edu). If you have any general questions or concerns related to the registration process, please contact:

Ms. Suzanne Stetson, Longwood Registration Office  
Phone 434-395-2709  
email [stetsonsm@longwood.edu](mailto:stetsonsm@longwood.edu)

**Registrar's Office Use Only**

Processed by

Date



### Parent/Longwood Faculty Agreement

Student's Name: \_\_\_\_\_

As the parent/guardian of a Virginia high school student enrolling in Longwood University's Personal Finance and Economics Dual Enrollment Course, I understand and agree to the following:

- I acknowledge that a student participating in this college level course will be enrolled as a Longwood University student and as such will be governed by the rules and regulations of Longwood University, including Longwood's Honor code. I acknowledge that enrolled students will be expected to behave, communicate and participate in this course as University students.
- I acknowledge that enrolled students (not parent/guardian) will be expected to communicate directly with their professor(s) on all issues. Acknowledging the exception for unique situations, there will be no direct communication between the parent/guardian and professor(s). Given the online format of this course, all student/professor communications is required to be via the student's Longwood email account. There will be no response from the professor on emails sent via non-Longwood e-mails (i.e., Gmail, Yahoo, etc.). **NO EXCEPTIONS!**
- I acknowledge that this course satisfies a mathematics goal at Longwood University and by design is very analytical and quantitative. I acknowledge that students enrolled in this course should expect to spend a minimum of 5-6 hours a day on course work in order to be successful in this four week intensely rigorous course.
- I acknowledge that the final examination is **MANDATORY** and will be given in a proctored environment on July 16, 2016 on the campus of Longwood University with programs running from roughly 7:30 a.m. through 1:00PM (depending on enrollment, there may be a need to have a morning and afternoon session, so times may vary). I further acknowledge that transportation to/from Longwood University for the final examination is the responsibility of the enrolled student. I acknowledge that parents/guardians are encouraged to join their student(s) at Longwood on the final examination day. There will be multiple programs for parents/guardians/students offered on various subjects. I further acknowledge that I/we will be invited to join my/our student(s), members of Longwood's faculty and sponsoring businesses for lunch in Longwood's dining hall.

\_\_\_\_\_  
Parent Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent/Guardian Email

\_\_\_\_\_  
Parent/Guardian Phone

By checking this box I acknowledge to the above agreement and tuition costs.

## APPLICATION FOR IN-STATE TUITION RATES

This form must be completed if you are claiming entitlement to Virginia in-state tuition rates pursuant to section 23-77.4, Code of Virginia. Supporting documents and additional information may be requested. NOTE: Answers to the questions must reflect information that is true for at least ONE YEAR PRIOR to the term in which you will enroll. Please print.

### Section A: Student Information

Name: \_\_\_\_\_  
Last First VISA Type Parent VISA Type

1. Where have you lived for the last two years? List current address first. Include dates.

From (mo./yr.)	To (mo./yr.)	Street Address	City	State	Zip

2. Do your parents/legal guardian provide 50% or more of your financial support or claim you as a dependent?  Yes  No
3. A. If you are married, do you wish to claim eligibility for in-state tuition rates based on your spouse's domicile?  Yes  No  
 B. If "Yes," does your spouse provide over 50% of your financial support?  Yes  No
4. Do any of the following characteristics apply to you? Place a check mark beside all that apply.
- Age 24 or older as of the first day of the term in which you intend to enroll
  - Veteran or active duty member of the U.S. Armed Forces
  - Graduate or first-professional student
  - Ward of the court or was a ward of the court until age 18
  - If both parents are deceased, no adoptive or legal guardian
  - Legal dependents other than a spouse

**DIRECTIONS FOR COMPLETING THE REMAINDER OF THIS FORM:**

If your response to question #2 or #3B is "Yes," complete both the shaded and unshaded areas of this form.

If your response to question #3B is "No," complete the unshaded areas of this form.

If you did not check any of the items in question #4, complete both the shaded and unshaded areas of this form.

If you checked any of the items in question #4 and answered "No" to question #2, complete only the unshaded areas of this form.

### Section B: Domicile Information

5. Are you completing the shaded areas for your (check only one):  
 Father  Mother  Legal guardian  Spouse

Note: For questions 6-10, you must answer the "B" question if your response to the "A" question is "No."

- |                                                                                                                                         |                          | Student<br>Yes No        |                          | Parent,<br>Spouse or<br>Guardian<br>Yes No |
|-----------------------------------------------------------------------------------------------------------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------------------------|
| 6. A. Have you been employed in Virginia for the past year?                                                                             | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>                   |
| B. If "No," were you employed in:<br>Student: Another state: ___ Not employed: ___<br>Parent: Another state: ___ Not employed: ___      |                          |                          |                          |                                            |
| 7.A. Was a tax return filed or income taxes paid to Virginia as a full- or part-year resident on all earned income last year?           | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>                   |
| B. If "No," were taxes paid to:<br>Student: Another state: ___ Didn't file: ___<br>Parent: Another state: ___ Didn't file: ___          |                          |                          |                          |                                            |
| 8.A. Are you a registered voter in Virginia?                                                                                            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>                   |
| B. If "No," are you registered in:<br>Student: Another state: ___ Not registered: ___<br>Parent: Another state: ___ Not registered: ___ |                          |                          |                          |                                            |
| 9. A. Do you hold a valid Virginia driver's license?                                                                                    | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>                   |
| B. If "No," do you hold a license in:<br>Student: Another state: ___ Not licensed: ___<br>Parent: Another state: ___ Not licensed: ___  |                          |                          |                          |                                            |
| 10. A. Did you operate a motor vehicle registered in Virginia during the last year?                                                     | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>                   |
| B. If "No," is it registered in:<br>Student: Another state: ___ Not registered: ___<br>Parent: Another state: ___ Not registered: ___   |                          |                          |                          |                                            |

- |                                                                                                                                                |                          |                          |                          |                          |                          |
|------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| 11. A. Are you a member of the U.S. Armed Forces?<br>If "No," go to #12                                                                        |                          | <input type="checkbox"/> | <input type="checkbox"/> | Yes                      | No                       |
| B. Have income taxes been paid to Virginia on all military income for the last year?<br>If "No," have income taxes been paid to another state? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| C. Does the current Leave/Earnings Statement reflect Virginia withholding?<br>If "Yes," please provide copy.                                   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 12. A. Is your parent/legal guardian or spouse a member of the U.S. Armed Forces?<br>If "No," go to #15.                                       | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| B. Have income taxes been paid to Virginia on all military income for the last year?<br>If "No," have income taxes been paid to another state? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| C. Does the current Leave/Earnings Statement reflect Virginia withholding?<br>If "Yes," please provide copy.                                   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

### Section C: Additional Information

13. If your spouse is in the military, will you have:
- A. Resided in Virginia for the past year?
  - B. Been employed and earned at least \$10,300 during the past year?
  - C. Paid income taxes to Virginia on all earned income?
14. If your parent/legal guardian is in the military, will the nonmilitary parent/legal guardian have:
- A. Resided in Virginia for the past year?
  - B. Been employed and earned at least \$10,300 during the past year?
  - C. Paid income taxes on all earned income?
  - D. Claimed you as a dependent for federal and Virginia income tax purposes?
15. If you have lived outside Virginia for the past year, will you have:
- A. Been employed in Virginia and earned at least \$10,300 during the past year?
  - B. Paid Virginia income taxes on all taxable income earned in Virginia during the past year?
16. If your parent/legal guardian has lived outside Virginia for the past year, will the parent/guardian have:
- A. Been employed in Virginia and earned at least \$10,300 during the past year?
  - B. Paid Virginia income taxes on all taxable income earned in Virginia during the past year?
  - C. Claimed you as a dependent for federal and Virginia income tax purposes?

### Section D: Parent/Legal Guardian or Spouse Information

17. Where have you lived for the last two years? (List current address first. Include dates)

Street Address	City	State	Zip	From	To
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

### Section E: Certification and Signature(s)

I certify that all of the information I provided in this application is true and accurate. I understand that this application is a legally binding document and that if I provide fraudulent information, I may be subject to repayment of tuition or dismissal. I agree to furnish the college with supporting documentation related to my application, if I am requested to do so.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

Signature of Parent/Legal Guardian or Spouse \_\_\_\_\_ Date \_\_\_\_\_