

Required Essays for First-Year Applicants Only:

1. Answer the question that corresponds to the school you selected above. Limit your answer to a half page or roughly 250 words.

College of Arts & Sciences: What work of art, music, science, mathematics, or literature has surprised, unsettled, or challenged you, and in what way?

Engineering: Discuss experiences that led you to choose an engineering education at U.Va. and the role that scientific curiosity plays in your life.

Architecture: What led you to apply to the School of Architecture?

Nursing: Discuss experiences that led you to choose the School of Nursing.

2. Answer one of the following questions in a half page or roughly 250 words:

What is your favorite word and why?

Describe the world you come from and how that world shaped who you are.

Discuss something you secretly like but pretend not to, or vice versa.

“We might say that we were looking for global schemas, symmetries, universal and unchanging laws – and what we have discovered is the mutable, the ephemeral, the complex.” Support or challenge Nobel Prize winner Ilya Prigogine’s assertion.

Transfer Applicants Only:

1. If yes, are you applying under the terms of the Guaranteed Admission Agreement between Virginia community colleges and U.Va.?

Yes No

2. Are you applying to the PRODUCED in Virginia engineering program in Lynchburg, VA?

Yes No

Required Essays for Transfer Applicants Only:

1. How do the possible career or professional plans you indicated on the Common Application relate to your planned course of study?

If you are applying to the College of Arts & Sciences and are undecided about your major, indicate your general area of interest.

If you are applying to the Architecture, Commerce, Education, Engineering, or Nursing Schools, tell us why you have chosen this field and what experiences (work, internships, etc.) have prepared you for it.

If you are applying to the Five-Year Teacher Education Program, indicate your academic major within the College of Arts & Sciences and your intended teaching area (e.g., elementary education, secondary education).

2. Describe your activities during periods of time (other than summer vacations) when you were not enrolled in college. Do you plan to spend the Spring term away from your current college or university? If the answer to either of these questions is yes, please describe, in chronological order, your activities or employment during these periods.



UNIVERSITY of VIRGINIA

Application for Virginia In-State Educational Privileges

Answer the questions below ONLY if you claim entitlement to Virginia in-state educational privileges pursuant to the Code of Virginia, Section 23-7.4. All forms and supporting documentation must be faxed by the appropriate application deadline. You will be classified as an out-of-state student for admission and tuition purposes if all forms and supporting documentation are not received by the applicable deadline date. Answer all questions on the forms and provide any necessary explanations. Once this material has been reviewed, you may be asked to provide additional information or documentation. Supporting documents may be faxed to (434) 982-2663.

Your social security number is used for accurate internal tracking of all applications for admission. While we request that you provide your social security number, disclosure is optional.

All applicants claiming entitlement to in-state educational privileges must complete Section A. If you are under the age of 19, or if you receive over half your financial support from your parent, spouse, or legal guardian; your parent, spouse, or legal guardian must complete Sections B and C. If you are at least age 19 and financially independent complete Sections A and C only. If you, your parent, spouse, or legal guardian is not a U.S. citizen, attach a copy of the visa or green card.

SECTION A (To be completed by the applicant)

- Full Legal Name _____
LAST OR FAMILY FIRST MIDDLE SUFFIX (III, JR.)
- Social Security Number ____ - ____ - ____ 3. Date of Birth ____/____/____ 4. Gender Male Female
- Are you a U.S. citizen? Yes No
 If no, you must complete the [Financial Guarantee Form](#) and fax a copy of green card or visa and enter date sent: _____
- Daytime telephone number _____ - _____ - _____ 7. E-mail address _____

SECTION B (To be completed by the parent, spouse, or legal guardian of financially dependent applicants. If the applicant's parents are divorced or separated, the parent living in Virginia must complete sections B and C of this form. If the applicant is financially independent, please complete Section C.)

- Full Legal Name _____
LAST OR FAMILY FIRST MIDDLE SUFFIX (III, JR.)
- Relationship to applicant _____ 3. Marital status _____
- Are you a U.S. citizen? Yes No
 If no, you must complete the [Financial Guarantee Form](#) and fax a copy of green card or visa and enter date sent: _____
- Daytime telephone number _____ - _____ - _____ 6. E-mail address _____
- Will you have provided over half of the applicant's financial support for at least one year prior to the term in which the applicant will enroll? Yes No
- Will you have claimed the applicant as a dependent on your federal and Virginia income tax returns for the tax year prior to the term in which the applicant will enroll? Yes No

SECTION C (To be completed by the applicant's parent, spouse, or legal guardian if the applicant is financially dependent or by the applicant if financially independent)

- How long have you lived in Virginia? _____ years _____ months
- Where have you lived (in the sense of physical presence) in the last two years?
 Current _____
FROM MONTH/YEAR TO MONTH/YEAR STREET ADDRESS CITY STATE ZIP CODE
 Previous _____
FROM MONTH/YEAR TO MONTH/YEAR STREET ADDRESS CITY STATE ZIP CODE
- If you have not lived in Virginia within the last two years, have you ever lived in Virginia? Yes No from _____ to _____

4. Where have you been employed (for at least one year prior to the date for which the applicant seeks in-state privileges) ?

Current _____

FROM MONTH/YEAR TO MONTH/YEAR	NAME/ADDRESS	CITY	STATE	HOURS PER WEEK

Previous _____

FROM MONTH/YEAR TO MONTH/YEAR	NAME/ADDRESS	CITY	STATE	HOURS PER WEEK

5. Will you have filed a tax return or paid income taxes to any state other than Virginia during the past year? Yes No
If yes, explain. _____

6. For at least one year immediately prior to the term for which entitlement is sought, will you have:

a. filed a resident tax return or paid resident taxes to Virginia on all earned income? Yes No
If no, explain. _____

b. been a registered voter in Virginia? Date registered _____ Yes No
If no, are you a registered voter in any state? Yes No

c. held a valid Virginia driver's license? Date issued _____ Yes No

7. Do you own or operate a motor vehicle? Yes No
If yes, has it been registered in Virginia during all of the past year? Date registered _____ Yes No

8. ANSWER THIS QUESTION **ONLY** IF YOU LIVE OUTSIDE VIRGINIA BUT WORK IN VIRGINIA.
Will you or your spouse have lived outside Virginia, been employed and earned at least \$10,300 in Virginia, paid Virginia income taxes on all taxable income earned in this Commonwealth, and claimed the applicant as a dependent for federal and Virginia income tax purposes for at least one year immediately prior to the term in which the applicant will enroll? Yes No

9. ANSWER THIS QUESTION **ONLY** IF YOU ARE A MILITARY FAMILY.
Are you or your spouse currently in the military? If yes, check self spouse Yes No

a. Are resident Virginia income taxes being paid on all military income? If yes, as of what date? _____ Yes No

b. Where were you stationed on that date? _____ Yes No
If yes, please submit a current copy of a Leave and Earnings Statement reflecting Virginia withholding. DATE SENT _____

10. ANSWER THIS QUESTION **ONLY** IF YOU ARE MILITARY PERSONNEL CLAIMING ELIGIBILITY FOR YOUR DEPENDENT SON, DAUGHTER, OR SPOUSE.

a. Are you active duty military personnel assigned to a permanent duty station in Virginia? Yes No

b. Are you presently residing in Virginia? Yes No
If yes, please submit a copy of your current military orders reflecting Virginia assignment. DATE SENT _____

PLEASE USE THE SPACE BELOW TO EXPLAIN ANY OF YOUR RESPONSES:

I certify that the information I have provided is true.
 APPLICANT SIGNATURE _____ DATE _____
 PARENT, SPOUSE, OR LEGAL GUARDIAN SIGNATURE _____ DATE _____

Please review your responses carefully before submitting this form. Please note that all questions in Section C of this form pertain to the applicant's parent, spouse, or legal guardian. This information will be used to determine in-state/out-of-state classification. Incomplete or inaccurate information will delay the review of the application.