Senior Citizen Tuition Waiver

Senior Citizens cannot self enroll in classes. A senior citizen shall only be permitted to register for a class, tuition-free, after all tuition paying students have been accommodated. Registration for individuals using the Senior Citizen’s Higher Education Act benefit begins three days prior to the first day of class. Registration must be completed in person at the relevant School Registrar’s Office. It is recommended that participants call relevant School Registrar’s Office and Enrollment Services to determine if space is available. For more information about the Senior Citizen Tuition Waiver, go to http://schev.edu/docs/default-source/tuition-aid-section/undergrad-grad-financial-aid/senior-citizen-tuition-waiver.pdf

SECTION ONE: PERSONAL INFORMATION (All fields are required.)

<table>
<thead>
<tr>
<th>First Name</th>
<th>MI</th>
<th>Last Name</th>
<th>DOB MM/DD/YY</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Mailing Address</th>
<th>City</th>
<th>State</th>
<th>ZIP code</th>
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<tr>
<th>Daytime Telephone</th>
<th>Email Address (we cannot process without an email address)</th>
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</table>

SECTION TWO: CLASS ENROLLMENT

<table>
<thead>
<tr>
<th>Class Number</th>
<th>Class Section</th>
<th>Course Title</th>
<th>Units/Credit Hours (n/a for noncredit)</th>
<th>Tuition</th>
<th>Fees</th>
<th>Total</th>
</tr>
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<tbody>
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SECTION THREE: VIRGINIA RESIDENCY

The Senior Citizens Higher Education Act of 1974, Code of VA § 23.1-640 requires registrant to be a legal resident of the state, who before the beginning of any semester in which he/she claims the Benefits of the Act, to have had his/her legal domicile in the state for at least one full year and to have been sixty years of age or older.

(Continue to page 2)
How long have you lived in Virginia? ________ Years ________ Months

Have you filed a tax return or paid income tax to any state other than Virginia during the past year? Y or N. If yes, indicate which state(s) and explain why you filed the return there.

__________________________________________________________________________________
__________________________________________________________________________________

For at least one year immediately prior to the term in which you will enroll, will you have:

- Filed a resident tax return or paid resident taxes to Virginia on all earned income? Y or N
- Been a registered voter in Virginia? Y or N
- Held a valid Virginia driver’s license? Y or N
- Owned or operated a motor vehicle? Y or N
- If yes, has it been registered in Virginia during all of the past year? Y or N

SECTION FOUR: CREDIT/NONCREDIT OPTIONS

The senior citizen shall be subject to University admission requirements and shall be admitted to a class after all tuition-paying students have been accommodated. The University shall determine whether or not it has the ability to offer the class.

_____ I certify that I am a Virginia resident, at least 60 years of age; therefore, I am eligible to take up to three classes per term for audit or noncredit and pay no tuition or fees, except class related fees under the Senior Citizens Higher Education Act. (There is no limit on the number of terms.)

_____ I certify that I am a Virginia resident, at least 60 years of age and that my taxable income for Virginia income tax purposes was no more than $23,850 last year; therefore, I am eligible to take classes for academic credit under the Senior Citizens Higher Education Act. I understand that the University requires proof of income eligibility (copy of completed current or last calendar year IRS 1040 Form, for example), if I wish to enroll in classes for academic credit.

SECTION FIVE: CERTIFICATION AND SIGNATURE

I hereby certify that I meet the criteria to be classified as a Senior Citizen as outlined in the Code of VA § 23.1-640 (listed above), and that the information I provided is true and complete to the best of my knowledge, and I agree to abide by the student regulations and the Honor Code of the University of Virginia.

PRINT NAME _______________________________________________________________________

REGISTRANT SIGNATURE_______________________________________ Date__________________