APPLICATION FOR THE BENEFIT OF PAYING IN-STATE TUITION
WHILE ATTENDING APPALACHIAN STATE UNIVERSITY
FOR CERTAIN MEMBERS OF THE ARMED SERVICES AND CERTAIN DEPENDENTS

ENTITLEMENTS FOR INDIVIDUALS SERVING IN NORTH CAROLINA (and CERTAIN DEPENDENTS):
Under North Carolina General Statue Section (G.S.) 116-143.3 certain members of the armed services and their dependent relatives (only available to dependents of active duty service members, not NC National Guard) may be eligible to be charged a tuition rate less than the out-of-state rate whether or not they qualify as residents for tuition purposes under G.S. 116-143.3. You can view a copy of the North Carolina State Residence Classification Manual for the statutory and related regulatory conditions at: https://ncresidency.cfnc.org/residencyInfo/home.

This application and all supporting documentation should be submitted to the Office of the Registrar as soon as possible.

1. ANSWER ALL QUESTIONS. INCOMPLETE FORMS WILL BE RETURNED. If a question is not applicable to your situation, type “Not Applicable” or “N/A.”

2. TYPE OR PRINT ALL RESPONSES. If you need more space to answer, indicate “see attached” in the space provided, and use separate additional sheets, numbering your responses the same as the corresponding question and send these sheets with this application form.

3. BE COMPLETELY ACCURATE to the best of your knowledge and understanding. Knowing falsification of your responses may subject you to disciplinary action including dismissal from the institution. When “date” is requested, provide month, day, and year.

4. SIGN AND DATE the application where indicated to make those acknowledgements and certifications necessary to render this a viable application.

5. ATTACH ALL REQUIRED ADDITIONAL DOCUMENTS:
   • Signed and dated letter on PRE-PRINTED MILITARY LETTERHEAD from the appropriate military authority attesting to your (or your sponsor’s) current duty status and installation location OR a copy of your contract with the NC National Guard.
   • FOR DEPENDENTS: the letter must also include documentation of or attestation to your dependency/relationship to your sponsor who is serving on active duty.

Please submit completed application and ALL required documentation to registrar@appstate.edu.
Applicant’s Full Name: _____________________________________________________

Personal E-mail Address: _________________________________________________

Street Address: ___________________________________________________________

City: _________________________________  State: _____  Zip Code: __________

Banner (Student) ID Number: _______________________________________________

1. Have you been academically admitted to this institution?       Yes       No

2. Beginning with what academic term are you seeking the tuition benefit?
   Semester:           Fall          Spring          Summer          Year:

3. Please select which category best describes your situation
   Active duty service member stationed in NC
   Contracted member of the North Carolina National Guard
   Dependent (child or spouse) of active duty service member stationed in NC

4. What is your (or your sponsor’s) rank: __________________________ and
   branch of service: ____________________________
   Is this a Reserve Component of the indicated service?      Yes            No

5. What is your permanent duty station?  ______________________________________

6. Do the orders by which the service member was assigned to active military duty in North
   Carolina establish a date on which that duty will cease?
   Yes              No  If Yes, what is the date: __________________________

7. Completion of the NC Residency Determination Process is required for all applicants.
   Please provide your Residency Confirmation Number: ____________________________

Student Attestations:
You must sign your initials by each statement below to you to indicate that you have read and
understand these statements. Failure to initial by each statement may result in your application being
returned and will delay processing.

_____  I have attached a signed and dated letter on PRE-PRINTED MILITARY LETTERHEAD from the
   appropriate military authority attesting to my (or my sponsor’s) current duty status and
   installation location (including dependency attestation for dependents) OR my signed contract
   with the North Carolina National Guard.

_____  I have completed the Residency Determination Process and am currently classified as a non-
   resident student.
I have answered all questions. If any question was not applicable to my situation, I have written “N/A.” Whenever “date” is requested, I have given month/day/year as accurately as possible. I understand that failure to answer all questions may result in the application being returned to me thus delaying a decision relative to my tuition status.

I have been completely accurate to the best of my knowledge and understanding. Further, I understand that knowing falsification of my responses may subject me to disciplinary action, including dismissal from the institution.

I have signed and dated this application where indicated. I understand that failure to make the necessary acknowledgements and certifications renders this an invalid application.

I understand that all applications and all supporting documents should be submitted to the appropriate department by the published deadline for the academic term for which I wish to be considered.

I understand that the burden of proof is on me, the applicant, to demonstrate that I qualify for the benefit of a reduced tuition rate according to North Carolina G.S. 116-143.3.

I understand that if it is determined that I am not eligible for the in-state tuition rate I will be responsible for and charged at the out-of-state rate.

I hereby certify that all information I have set forth herein is true to the best of my knowledge, pursuant to my reasonable inquiry where needed. I hereby acknowledge that the institution may verify the information set forth herein from sources accessible under law to the institution but that the institution may divulge the contents of this application only as permitted under the Family Educational Rights and Privacy Act of 1974 if I am, or have been, in attendance at this institution.

PLEASE SIGN AND DATE BELOW.

Signature of Applicant_________________________ Date_________________________

FOR OFFICE USE ONLY

Date of Review _____________________ Reviewed By ____________________________

Tuition Status Determined:  In-state  Out of State