



## Office of the Registrar

P.O. Box 32009 | Boone, NC 28608 [registrar@appstate.edu](mailto:registrar@appstate.edu)

### APPLICATION FOR THE BENEFIT OF PAYING IN-STATE TUITION AS AN INDIVIDUAL UTILIZING VETERANS AFFAIRS EDUCATION BENEFITS WHILE ATTENDING APPALACHIAN STATE UNIVERSITY.

#### **ENTITLEMENTS FOR INDIVIDUALS USING VETERANS AFFAIRS EDUCATION BENEFITS:**

Under North Carolina General Statute Section (G.S.) 116-143.3A certain veterans and other covered individuals, as defined by 38 USC § 3679, may be eligible to be charged the in-state tuition rate and applicable mandatory fees for enrollment without satisfying the 12-month residency requirement under G.S. 116-143.1.

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:
  - Certificate of Eligibility for VA Education Benefits or VA Vocational Rehabilitation Approval
  - Proof of abode in North Carolina (proof of abode includes, but is not limited to: copy of lease, a letter from landlord, copy of utility bill, or verification of on campus housing). The student's name MUST appear on the proof of abode.

Please submit completed application and ALL required documentation to [registrar@appstate.edu](mailto:registrar@appstate.edu).

Office of the Registrar  
P.O. Box 32009 | Boone, NC 28608  
828-262-2050 | [registrar@appstate.edu](mailto: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. Do you currently live in North Carolina or will you be living in North Carolina on the first day of the term? **(Documentation of a valid NC address, in your name, is required.)**  
    Yes      No
  
4. Are you eligible for and will you be using one of the following VA Education Benefits while enrolled at Appalachian?  
    Chapter 30 (Montgomery GI Bill® for Active Duty)  
    Chapter 31 (Veterans Readiness and Employment)  
    Chapter 33 (Post 9/11 GI Bill®, Transfer of Post 9/11 GI Bill®, or Fry Scholarship)  
    Chapter 35 (Dependents Education Assistance Program)  
  
    Yes      No
  
5. 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 copy of my CERTIFICATE OF ELIGIBILITY for VA Education Benefits

\_\_\_\_\_ I am currently living in North Carolina or will be living in North Carolina on the first day of the term. **I intend to establish residency in North Carolina and understand that this document serves as my letter of intent to establish residency.**

\_\_\_\_\_ I have completed the Residency Determination Process and am currently classified as a non-resident student.

\_\_\_\_\_ I have attached a copy of my PROOF OF ABODE IN NORTH CAROLINA. Proof of abode includes, but is not limited to: copy of lease, a letter from landlord, copy of utility bill, or verification of on campus housing.

\_\_\_\_\_ 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 as a recipient of education benefits under Chapter 30 (Montgomery GI Bill® Active Duty), Chapter 31 (Veterans Readiness and Employment), Chapter 33 (Post 9/11 GI Bill®, Transfer of Post 9/11 GI Bill®, or Fry Scholarship), or Chapter 35 (Dependents Education Assistance Program)

\_\_\_\_\_ 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