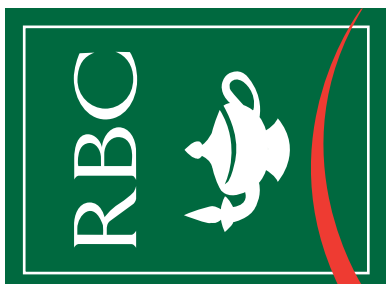


RICHARD BLAND COLLEGE OF THE COLLEGE OF WILLIAM & MARY



Richard Bland College of The College of William and Mary in Virginia was founded in 1960. It is the Junior College of the Commonwealth of Virginia. The College offers a traditional curriculum in the liberal arts and sciences leading to the Associate Degree, and other programs appropriate to a junior college. The curriculum is intended to allow students to acquire junior status after transferring to a four-year college, or to pursue expanded career opportunities. The College also recognizes its responsibility to serve the public by providing educational and cultural opportunities for the community at large.

Application

FOR ADMISSION

(Check off as you complete)

- Application Form
- \$20.00 fee (Non Refundable)
- High School Transcript
- College Transcript(s)
- SAT scores

PREFERRED DEADLINES

Fall semester: August 15

Spring semester: December 15

Applications accepted on a rolling basis throughout the year.

Please return all application materials to:
Richard Bland College
Office of Admissions & Student Development
11301 Johnson Road
Petersburg, VA 23805

QUESTIONS? CALL 862-6225,
EMAIL US AT APPLY@RBC.EDU,
OR VISIT WWW.RBC.EDU

THIS SECTION IS FOR OFFICE USE ONLY.

Application Date: _____

Application Fee: _____

Check #: _____

Richard Bland College is accredited by The Commission on Colleges of the Southern Association of Colleges and Schools [1866 Southern Lane, Decatur, GA 30033-4097; (404) 679-4501] to award the Associate Degree.

RICHARD BLAND COLLEGE

OF THE COLLEGE OF WILLIAM and MARY

APPLICATION FOR ADMISSION

R _____
For Office Use

Legal Name: _____
(Last) (First) (Middle)

Maiden Name: _____

Social Security Number: _____

Permanent Mailing Address:

(P.O. Box/Number & Street)

(City) (State) (ZIP Code)

(Permanent Phone Number)

(Email)

Date of Birth (REQUIRED): _____

Term and Year you wish to enter RBC: Fall Spring Summer Year _____

Citizenship: U.S. Other: (please specify) _____

Legal Residency: VA Other: (please specify) _____

Gender: Female Male **Marital Status:** Single Married
(REQUIRED) This information is required solely for determining compliance with federal civil rights laws,
and your response will not affect consideration of your application.
Ethnic Identity: Black (not of Hispanic origin) White (not of Hispanic origin)
 Hispanic American Indian or Alaskan Native
 Asian/Pacific Islander

High School Diploma: Date of graduation: June January August Year _____

Or **GED:** Date issued: _____

Please list last high school attended:

Name of school	Location	Month/Year Attended
		From To

Please list all colleges attended:

Name of school	Location	Month/Year Attended
		From To

First-Time College Student

Transfer Student

Taken RBC classes or other college credit through high school

Do you plan to earn a degree at RBC? Yes No

If NO, have you already earned: Associate Degree Bachelor Degree or higher

Full-Time (12 credit hours or more)

Part-Time (less than 12 credit hours)

SAT: Taken (dates) _____ Plan to take (dates) _____

Father's Name _____ Father's DOB: _____

Mother's Maiden Name: _____ Mother's DOB: _____

Relatives who have attended Richard Bland College:

Dates of Attendance

Degree received

Name

Relationship

at RBC

Name	Relationship	Dates of Attendance at RBC	Degree received
_____	_____	_____	_____
_____	_____	_____	_____

High School/College/Community Activities (such as sports, clubs, volunteer work, jobs):

Awards and Honors (scholarships, honor societies, special recognition of achievement):

EMERGENCY CONTACT INFORMATION:

Name: _____

Address: _____

City, State, Zip: _____

Relationship: _____

Phone Number: _____

Richard Bland College In-State Residency Form: **SIDE A**

To be completed by the Applicant
MUST BE COMPLETED IN INK

Pursuant to Section 23-7.4 of *The Code of Virginia*, applicants must complete this form as well as the Supplemental In-State Residency Information Form. Failure to do so will result in automatic assignment of out-of-state tuition rates.

Applicant's Legal Name: _____ Social Security Number _____

EVERY APPLICANT MUST COMPLETE SIDE A. IF A BOX IS NOT CHECKED, YOUR ANSWER IS ASSUMED TO BE "NO."

IF YOU DO NOT CHECK "YES" TO ANY OF THE FOLLOWING QUESTIONS, then your parent or legal guardian must complete the Supplemental In-State Residency Form (side B). Your parent or legal guardian's signature is required for the Supplemental Residency Form to be complete.

Do any of the following characteristics apply to you? (Please place an "X" in the appropriate boxes.)

- Yes I will be age 24 or older before the first day of classes.
- Yes I am a veteran of the United States Armed Forces.
- Yes I will be enrolled in a graduate or professional program (beyond a Bachelor's).
- Yes I am married.
- Yes I am an orphan or a ward of the court, or I was a ward of the court until age 18.
- Yes I do have legal dependents (other than spouse).
- Yes I can present clear and convincing evidence that I am self-sufficient.

If you answer "YES" to BOTH of the following questions, then your spouse must complete the Supplemental In-State Residency Form (side B). Your spouse's signature is required for the Supplemental In-State Residency Form to be complete.

- Yes I am married and wish to claim eligibility for in-state tuition rates based on my spouse's domicile.
- Yes My spouse provides over 50 percent of my financial support.

For the applicant, how many years have you lived in Virginia? _____ What is your present city or county of residence? _____
Are you a citizen of the United States? _____ If you are a non United States citizen, please indicate your type of VISA _____

Where have you lived for the past two years? List all addresses beginning with the most recent.

From (mm/yy)	To (mm/yy)	Street Address	City	State	ZIP Code
___/___	Present	_____	_____	_____	_____
___/___	___/___	_____	_____	_____	_____
___/___	___/___	_____	_____	_____	_____

Do any of the following characteristics apply to you? (Please place an X in appropriate boxes.)

- Yes No ... My parent(s) or legal guardian provides 50 % of my financial support.
- Yes No ... For at least one year prior to the term in which I will enroll at Richard Bland College, I have been employed.
- Yes No ... For at least one year prior to the term in which I will enroll at Richard Bland College, I have filed a tax return or paid income taxes to Virginia on all earned income.
- Yes No ... I am a registered voter in Virginia.
- Yes No ... I have a valid driver's license in the state of Virginia.
- Yes No ... I owned or operated a motor vehicle during the past year.

- Yes No ... I have filed taxes to another state. (Please indicate the state to which you paid taxes.) _____.
- Yes No ... I am a registered voter in another state. (Please give the name of that state.) _____.
- Yes No ... I do not have a valid Virginia driver's license. I have a driver's license from the state of _____.
- Yes No ... I did not own or operate a motor vehicle in this state, but I did have a motor vehicle registered in the state of _____.

Military Service

- Yes No ... I am a member of the United States Armed Forces at the present time.
- Yes No ... My parent or spouse is presently a member of the United States Armed Forces.
- Yes No ... **I have attached a copy of the most recent Leave and Earnings Statement from the person who is a member of the US Armed Forces.**
- Yes No ... Virginia income taxes have been paid on all military income for one year prior to the term in which I will be enrolled.
- Yes No ... My spouse is in the military. I have resided in Virginia, been employed, earned at least \$10,300, and paid income taxes to Virginia for at least one year prior to the term in which I will be enrolled.
- Yes No ... I/my parent or legal guardian/my spouse have/has changed his/her state of legal residence to Virginia effective on this date _____.
I have attached a copy of the military orders or other military-acknowledged documentation, which verifies this change.

Answer this question only if you live outside Virginia but work in Virginia:

- I have lived outside Virginia, worked in Virginia, earned at least \$10,300, and paid Virginia income taxes on all taxable income earned in the Commonwealth for at least one year prior to the term in which I will enroll.

I certify that the above statements are true and correct to the best of my knowledge.

Applicant's Signature _____

Date _____

Richard Bland College Supplemental In-State Residency Form: **SIDE B**

To be completed by the parent, legal guardian, or spouse (Head of Household)

MUST BE COMPLETED IN INK

Applicant's Legal Name: _____ Applicant's Social Security Number: _____

Name of parent, legal guardian, or spouse: _____

Relationship to applicant: _____

How many years have you lived in Virginia? _____

Are you a citizen of the United States? _____ If you are a non United States citizen, please indicate your type of VISA: _____

What is your present city or county of residence? _____

Where have you lived for the past two years? List all addresses beginning with the most recent.

From (mm/yy)	To (mm/yy)	Street Address	City	State	ZIP Code
___/___	Present	_____	_____	_____	_____
___/___	___/___	_____	_____	_____	_____

Do any of the following characteristics apply to you? (Please place an "X" in the appropriate boxes.)

- Yes No ... I have claimed the applicant as a dependent on my federal and Virginia income taxes for the tax year prior to the term in which the applicant will enroll.
- Yes No ... I have provided more than 50 percent of the applicant's financial support for at least one year prior to the term in which the applicant will enroll.
- Yes No ... For at least one year prior to the term in which the applicant will enroll at Richard Bland College, I have been employed.

- Yes No ... For at least one year prior to the term in which the applicant will enroll at Richard Bland College, I have filed a tax return or paid income taxes to Virginia on all earned income.

OR

- Yes No ... I filed taxes to another state: _____
- Yes No ... I am disabled. Additional documentation may be requested.
- Yes No ... I am/was on public assistance. Additional documentation may be requested.
- Yes No ... Other (Please explain): _____

- Yes No ... I have a valid Virginia driver's license. _____

- Yes No ... For at least one year prior to the term in which the applicant will enroll at Richard Bland College, I have owned or operated a motor vehicle in Virginia.

Military Service

- Yes No ... I am an active duty member of the United States Armed Forces.
- Yes No ... My spouse is an active duty member of the United States Armed Forces.
- Yes No ... **A Leave and Earnings Statement is attached to this form, verifying that one of us is in the armed forces on active duty.**
- Yes No ... Virginia income taxes have been paid on all military income for one year prior to the term in which the applicant will enroll.
- Yes No ... If the military parent was not residing in Virginia, but the non-military parent resided in Virginia, was employed and earned at least \$10,300, paid Virginia income taxes, and claimed the applicant as a dependent for federal and Virginia income tax, then check the yes box.

Please indicate the date you or your military spouse was stationed or established residence, in Virginia pursuant to military orders. Date: _____

Please attach a copy of the military orders or other military-acknowledged documentation.

If you or your spouse live outside Virginia but work in Virginia:

- Yes No ... Have you or your spouse lived outside Virginia, worked in Virginia, earned at least \$10,300, and paid Virginia income taxes on all taxable income earned in this Commonwealth for at least one year prior to the term in which the applicant will enroll?
- Yes No ... If the answer to the above question is yes, will the parent, legal guardian, or spouse employed in Virginia have claimed the applicant as a dependent for federal and Virginia income taxes for at least one year prior to the term in which the applicant will enroll?

I certify that the above statements are true and correct to the best of my knowledge.

Signature of Parent, Legal Guardian, or Spouse

Date

THE PARENT /LEGAL GUARDIAN/SPOUSE WHO PROVIDES MORE THAN 50% OF FINANCIAL SUPPORT FOR THE APPLICANT MUST SIGN THIS DOCUMENT.

