



Application for Readmission

REQUIRED MATERIALS

- Application Form
- High School Transcripts
- College Transcripts (If applicable)
- SAT Scores

FOR OFFICE USE ONLY

Application Date: _____

Application Fee: _____

Check Number: _____

RICHARD BLAND COLLEGE

OF THE COLLEGE OF WILLIAM & MARY

READMISSION APPLICATION

RICHARD BLAND COLLEGE IS AN EQUAL EDUCATIONAL OPPORTUNITY INSTITUTION, AND, IN KEEPING WITH THIS POLICY, THE COLLEGE MAKES NO DISTINCTION IN THE ADMISSION OF STUDENTS OR IN ANY OTHER OF ITS OFFICIAL ACTIVITIES ON THE BASIS OF RACE, COLOR, SEX, AGE, RELIGION, HANDICAP, OR NATIONAL ORIGIN. ALL STANDARDS OF THE COLLEGE INCLUDING THOSE GOVERNING STUDENT EMPLOYMENT AND FINANCIAL AID ARE APPLIED ACCORDINGLY.

R _____

For Office Use

This form is to be completed by a student who has previously attended Richard Bland College.

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

Social Security Number (REQUIRED): _____

Name on RBC records: _____

Date of Birth: _____

Permanent Mailing Address:

Temporary Address:

(Number & Street/P.O. Box)

(Number & Street/P.O. Box)

(City) (State) (ZIP Code)

(City) (State) (ZIP Code)

(Permanent Phone Number)

(Temporary Phone Number)

(Work Phone Number)

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

Legal Residency: VA Other: (specify) _____

Gender: Female Male **Marital Status:** Single Married: Maiden Name _____

Ethnic Identity (optional): Are you Hispanic or Latino? _____ Yes _____ No

Select all races that apply

American Indian or Alaskan Native

Asian

Black or African American

Native Hawaiian or Other Pacific Islander

White

Race Unknown

Last date of attendance at RBC: _____

Semester you wish to reenter RBC: (check one) Fall _____ Spring _____ Summer _____

Planned enrollment status: (check one) Day *or* Evening; Full-time *or* Part-time

Why did you leave RBC? _____

Why would you like to return to RBC? _____

Have you attended any other college(s) since leaving RBC? yes no

List all colleges and dates attended. _____

Are you a Veteran? _____yes _____no

All students of Richard Bland College are required to abide by the principles and practices of The Honor System. You will find a statement of The Honor System in our current Student Handbook.

I certify that the information provided in this application is complete and correct to the best of my knowledge.

I also certify that I have read and understand all the rules and regulations as published in the Richard Bland College Catalogue and the Student Handbook including the statement on The Honor System, and if admitted, I agree to comply with and to be governed by them and all officially announced changes.

(Signature)

(Date)

Richard Bland College In-State Tuition Application: 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 long 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	_____	_____	_____	_____
___/___	___/___	_____	_____	_____	_____
___/___	___/___	_____	_____	_____	_____

- Yes.....My parent(s) or legal guardian provides 50 % of my financial support.
- Yes.....For at least one year prior to the term in which I will enroll at Richard Bland College, I have been employed.
- Yes.....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.....I am a registered voter in Virginia.
- Yes.....I have a valid driver's license in the state of Virginia.
- Yes.....I owned or operated a motor vehicle during the past year.

- Yes..... I have filed taxes to another state. (Please indicate the state to which you paid taxes.) _____.
- Yes..... I am a registered voter in another state. (Please give the name of that state.) _____.
- Yes..... I do not have a valid Virginia driver's license. I have a driver's license from the state of _____.
- Yes..... 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.....I am a member of the United States Armed Forces at the present time.
- Yes.....A member of my family is presently a member of the United States Armed Forces.
- Yes.....**I have attached a copy of the most recent *Leave and Earnings Statement* from the person who is a member of the US Armed Services.**
- Yes.....Virginia income taxes have been paid on all military income for one year prior to the term in which I will be enrolled.
- Yes.....My spouse is in the military. I have resided in Virginia, been employed, earned income that equates to 50 weeks x 40 hours each week x current minimum wage, and paid income taxes to Virginia for at least one year prior to the term in which I will be enrolled.
- Yes.....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 income that equates to 50 weeks x 40 hours each week x current minimum wage, 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 who provides 50% of financial support

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 long have you lived in Virginia? _____

Are you a citizen of the United States? _____ If you are a non United States citizen, please indicate you 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.....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.....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.....For at least one year prior to the term in which the applicant will enroll at Richard Bland College, I have been employed.

Yes.....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

I filed taxes to another state: _____

I am disabled. Additional documentation may be requested.

I am/was on public assistance. Additional documentation may be requested.

Other (Please explain): _____

Yes.....I have a valid Virginia driver's license.

Yes.....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.....I am an active duty member of the United States Armed Forces.

Yes.....My spouse is an active duty member of the United States Armed Forces.

Yes.....**A Leave and Earnings Statement is attached to this form, verifying that one of us is in the armed services on active duty.**

Yes.....Virginia income taxes have been paid on all military income for one year prior to the term in which the applicant will enroll.

Yes.....If the military parent was not residing in Virginia, but the non-military parent resided in Virginia, was employed and earned income that equates to 50 weeks x 40 hours each week x current minimum wage, paid Virginia income taxes, and claimed the applicant as a dependent for federal and Virginia income tax, then check the 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.....I have lived outside Virginia, worked in Virginia, earned income that equates to 50 weeks x 40 hours each week x current minimum wage, and paid Virginia income taxes on all taxable income earned in the Commonwealth for at least one year prior to the term in which the applicant will enroll.

Yes.....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.