Office of the Registrar
500 Galliher Drive
Fairmont, WV 26554
(p) 304-367-4907
(f) 681-661-4534
registrar@pierpont.edu

Application for Reclassification of Residency
Tuition & Fee Purposes

Section I: Student Information

Student Name_____
Last First Middle

Student ID_____ Current Date_____
(R00……)

Current Address_____

City_____ State_____ Zip_____

Telephone Number (_____) _____

United States Citizen: Yes_____ No_____
Type of Visa Date of Issuance Port of Entry

Section II: Questionnaire

List your permanent address(es) for the past four years.

_____ _____ _____
Address Dates Parental/Legal Guardians Residence (Y/N)

_____ _____ _____
Address Dates Parental/Legal Guardians Residence (Y/N)

_____ _____ _____
Address Dates Parental/Legal Guardians Residence (Y/N)

_____ _____ _____
Address Dates Parental/Legal Guardians Residence (Y/N)

Did you live in West Virginia prior to attending Pierpont C&TC? Yes_____ No_____
Include How Long

List all institutions, including high schools and colleges/universities, you've attending the past four years.

_____ _____ _____
Name of Institution Location Dates

_____ _____ _____
Name of Institution Location Dates

_____ _____ _____
Name of Institution Location Dates

When do you consider that your West Virginia residency began?_____

Please answer the following:

- Do you own real estate in West Virginia? Yes_____ No_____
- Are you presently married to a West Virginia resident? Yes_____ No_____
- Are you currently registered to vote in West Virginia? Yes_____ No_____
- Do you possess a valid West Virginia driver's license? Yes_____ No_____
- Do you own a vehicle that's currently registered in West Virginia? Yes_____ No_____
- Have you filed a West Virginia state personal income tax return? Yes_____ No_____
- Did your parent(s)/guardian(s) recently claim you as a dependent? Yes_____ No_____

List the names of your employers for the last four years.

_____	_____	_____
Employer	Address	Dates Employed
_____	_____	_____
Employer	Address	Dates Employed
_____	_____	_____
Employer	Address	Dates Employed

Section III: United States Military Members and Veterans

Are you currently on active duty member of the military? Yes_____ No_____

_____
Provide additional Information

Have you previously served on active duty for at least two years? Yes_____ No_____

_____
Provide additional Information

Are you currently a member of the West Virginia National Guard? Yes_____ No_____

_____
Provide additional Information

Any additional military/veteran's information_____

_____

_____

Section: Statement and Documentation

Please provide the following attached to this application:

- Statement from the Applicant explaining request for West Virginia residency for tuition purposes.
- Documentation to verify the information provided in this application. All information must be documented.

Student Signature_____ **Date**_____

Office of the Registrar:

Completed By_____ Date_____