

# Albany State University

## APPLICATION FOR BORDER STATE WAIVER (Alabama, Florida, North Carolina, South Carolina & Tennessee ONLY) TUITION DIFFERENTIAL WAIVER

Prior to submitting a **Border State Residents** out-of-state tuition waiver application, students are advised to review the University System of Georgia Border State Residents out-of-state tuition waiver policy found in Section 7.3.4.1 of the Board of Regents Policy Manual ([www.usg.edu/policymanual](http://www.usg.edu/policymanual)). Please note that the Border State Residents out-of-state tuition waiver is available to qualifying undergraduate students only. **Documentation must be provided with application.**

### Section I – To be completed by the STUDENT

Name:	Student ID:
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Address: \_\_\_\_\_

City:	State:	Zip:
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Email:	Phone:
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Term applying for waiver: <input type="checkbox"/> Fall <input type="checkbox"/> Spring <input type="checkbox"/> Summer Year: _____	Will you be attending as an undergraduate student? <input type="checkbox"/> Yes <input type="checkbox"/> No
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Citizen Status:  U.S. Citizen  U.S. Permanent Resident  Nonresident Alien  Other: \_\_\_\_\_

This waiver application is based on your present and permanent home (domicile) in the following eligible state (Alabama, Florida, North Carolina, South Carolina) bordering Georgia:  
State: \_\_\_\_\_

Will you have lived in the above state for at least 12 consecutive months immediately preceding the first day of classes for the term the waiver is requested?  Yes  No

Have you graduated or will you graduate from a high school in the above state?  Yes  No

Have you ever lived outside of the above state above?  Yes  No

**If Yes:** The above has been your state of domicile since: \_\_\_\_\_ (mm/yyyy)

Briefly describe your reason for moving to the above state: \_\_\_\_\_  
\_\_\_\_\_

Do you hold a current driver's license/state-issued ID?  Yes  No State issued? \_\_\_\_\_

Do you own a motor vehicle?  Yes  No State registered? \_\_\_\_\_

Are you registered to vote?  Yes  No State registered? \_\_\_\_\_

Did you file a state income tax return for the most recent tax year?  Yes  No State filed? \_\_\_\_\_

**Employment Information** – Please list all employment for the past two years, including military service. Attach additional sheets if needed.

From	To	Employer	City	State	# of hours worked per week

**Students under the age of 24 must complete the following:**

Do you have a parent or U.S. court-appointed legal guardian who has established and maintained domicile in an eligible state (AL, FL, NC, SC, & TN) bordering Georgia for at least 12 consecutive months immediately preceding the first day of classes for the term the waiver is requested?  Yes  No State: \_\_\_\_\_

**If Yes:**

Name of the above individual: \_\_\_\_\_

Relationship:  Parent  U.S. court-appointed legal guardian

Has that individual ever lived outside of the above state?  Yes  No

**If Yes:**

They have maintained domicile in the above state since: \_\_\_\_\_ (mm/yyyy)

Briefly describe their reason for moving to the above state: \_\_\_\_\_  
\_\_\_\_\_

Do they hold a current driver's license/state-issued ID?  Yes  No State issued? \_\_\_\_\_  
Do they own a motor vehicle?  Yes  No State registered? \_\_\_\_\_  
Are they registered to vote?  Yes  No State registered? \_\_\_\_\_  
Did they file a state income tax return for the most recent tax year?  Yes  No

**If Yes:**

State filed? \_\_\_\_\_ Were you claimed as a dependent?  Yes  No

Did they file a federal income tax return for the most recent tax year?  Yes  No

**If Yes:** Were you claimed as a dependent?  Yes  No

I understand that any material false statement made knowingly and willingly by me on this application, or any documents attached hereto may, in accordance with O.C.G.A. 16-10-71, which provides that upon conviction, a person who knowingly commits the offense of false swearing shall be punished by a fine of not more than \$1,000 or by imprisonment for not less than one nor more than five years, or both, subject me to prosecution in a court of law. Additionally, I further understand that any such false statement may subject me to immediate dismissal from the institution.

Further, I certify that, to the best of my knowledge, the information submitted on this application is true and complete.

\_\_\_\_\_  
Student Signature

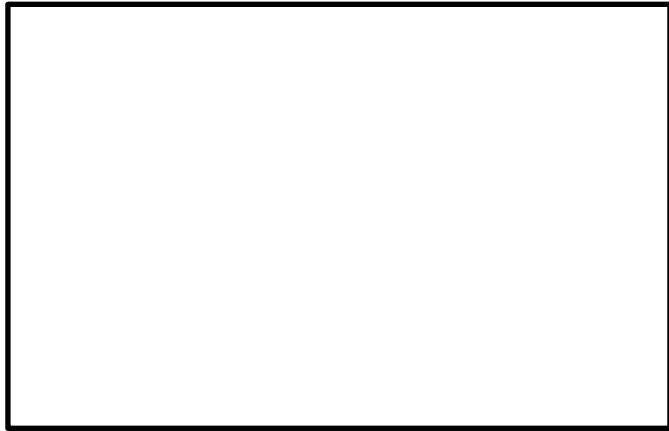
\_\_\_\_\_  
Date

STATE OF \_\_\_\_\_

COUNTY OF \_\_\_\_\_

The foregoing instrument was acknowledged before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_,

By \_\_\_\_\_ (individual applying for Tuition Waiver)



**Notary Seal**

\_\_\_\_\_  
Signature of Notary Public

State of \_\_\_\_\_

\_\_\_\_\_  
Name of Notary Typed, Printed or Stamped

Personally known \_\_\_\_\_ or produced Identification \_\_\_\_\_

\_\_\_\_\_  
Type of Identification Produced

## LAWFUL PRESENCE IN THE UNITED STATES

Only those students verified to be lawfully present in the United States may be considered for an out-of-state tuition waiver. Waiver applicants may be required to provide additional documentation to meet this requirement. One of the following ***must*** be submitted:

- A certified US Birth Certificate showing the student was born in the U.S. or a U.S. Territory. (A photocopy or faxed copy is not acceptable)
- A U.S. Certificate of Naturalization (USCIS form N-550 or N-570)
- A U.S. Certificate of Citizenship (USCIS form N-560 or N-561)
- A U.S. Certificate of Birth Abroad issued by the Department of State (DS-1350) or a Consular Report of Birth Abroad (FS-240).
- A current military ID (service member only, not dependent)
- A current, valid permanent resident card (USCIS form I-151 or I-551). Must have copy of the front and back of the card.
- A current U.S. Passport

## DOCUMENTATION OF WAIVER ELIGIBILITY

Additional documentation is also required to confirm domicile in the border state such as the following:

- Copy of lease agreement or warranty deed (dated 12+ months)
- Copy of driver's license or state-issued ID
- Copy of vehicle registration
- Copy of state tax return filed for the most recent tax year
- Copy of federal tax return filed for the most recent tax year
- Copy of utility bills

### **By Mail:**

Office of the Registrar  
Atten: Tuition Classification Officer  
Albany State University  
2400 Gillionville Road  
Albany, GA 31707

### **By Email: (Preferred)**

[TCO@asurams.edu](mailto:TCO@asurams.edu)  
Subject: ATTN: Border State Waiver

*Forms and documentation should be submitted as a completed packet at least 4 weeks prior to classes beginning.*