

# Wytheville Community College

## Senior Citizen Agreement AND Enrollment Form

SEMESTER     FALL             SPRING             Summer            Year 20\_\_\_\_\_

Last Name: \_\_\_\_\_ Date: \_\_\_ / \_\_\_ / \_\_\_

First Name: \_\_\_\_\_ SSN: \_\_\_\_\_ -- \_\_\_\_\_ -- \_\_\_\_\_

Empl. I.D.: \_\_\_\_\_ Date of Birth: \_\_\_ / \_\_\_ / \_\_\_

Address: \_\_\_\_\_ Home Phone: ( \_\_\_\_\_ ) -- \_\_\_\_\_ -- \_\_\_\_\_

I hereby certify that I am eligible for free tuition and fees for **credit** courses, part-time or full-time. I am 60 years of age or older and have been legally domiciled in Virginia for this past year. I had a taxable individual income not exceeding \$23,850 for Virginia income tax purposes for the year preceding the year in which enrollment is sought. **Must provide documentation of income eligibility prior to approval.**

**OR**

I hereby certify that I am eligible for free tuition for **audit** of credit courses or for taking non-credit courses (not to exceed three courses per semester). I am 60 years of age or older and I am a legal resident of Virginia.

Class No.	Course No.	Section	Meeting Time(s)	Location	Audit *	Credit

Your registration may be held until the last day to register due to the anticipation that this class might fill up with tuition-paying students. You will be notified immediately after the last day to register as to the availability of room in the class for senior citizens.

You have the option at this point to pay your tuition if you want to ensure a spot for yourself in class.

**\*IF YOU HAVE REQUESTED TO AUDIT A COURSE, ALL AUDITS MUST BE APPROVED BY THE APPROPRIATE ACADEMIC DEAN.**

Senior citizens shall pay no tuition or fees for courses offered for academic credit or for courses not offered for academic credit, except fees established for the purpose of paying for course materials, such as laboratory fees, subject to a determination by the institution of its ability to offer the course or courses for which the senior citizen registers.

**Student's Signature:** \_\_\_\_\_

Academic Dean's Approval for Audited Courses \_\_\_\_\_ (Date) \_\_\_\_\_

Registrar's Office Approval \_\_\_\_\_ (Date) \_\_\_\_\_