



Application for Admission to Graduate Study in Arts and Sciences

www.wm.edu/as/graduate

INSTRUCTIONS TO THE APPLICANT: Complete and submit this application, ~~with the fee~~ and all supporting materials, to the Director of Graduate Studies, Department or Program (to which you are applying), The College of William and Mary, P.O. Box 8795, Williamsburg, VA 23187-8795. Consult the website or department/program to which you are applying for additional information, requirements, and deadlines for submitting supplemental forms and supporting materials. In addition, the following items must be submitted, if applicable:

- Letter of Recommendation forms (Three letters are required.)
- Application for Virginia In-state Tuition Privileges (Return to the University Registrar; only applicants who consider themselves residents of Virginia should complete this form.)
- International Admission Application (Should be completed by all non-US citizens. This signed form must be on file before an official letter of admission can be sent.)

~~**APPLICATION FEE:** A non-refundable application fee of \$45.00 (U.S. currency) made payable to the "College of William and Mary" must accompany this form.~~

(Please type or print clearly.)

Name _____ Date _____
(Family) (First) (Middle) (Suffix)

Department/Program to which you are applying:

- | | | | | |
|---|--|---|----------------------------------|--|
| <input type="checkbox"/> American Studies | <input type="checkbox"/> Applied Science | <input type="checkbox"/> Chemistry | <input type="checkbox"/> History | <input type="checkbox"/> Psychology |
| <input type="checkbox"/> Anthropology | <input type="checkbox"/> Biology | <input type="checkbox"/> Computer Science | <input type="checkbox"/> Physics | <input type="checkbox"/> Public Policy |
| | | <input type="checkbox"/> Computer Science (COR) | | |

Degree for which you are applying: M.A. M.A./Ph.D. M.P.P. M.S. M.S./Ph.D. Ph.D.

Semester and year for which you are applying: Fall Spring Summer _____ Year

(Applicant should not write below this line.)

Date received by Department/Program _____ Application completed on _____

Recommendation by the Department/Program of _____

- | | |
|---|--|
| <input type="checkbox"/> Approved for admission as a regular graduate student | <input type="checkbox"/> Application for admission disapproved |
| <input type="checkbox"/> Approved for admission as a provisional graduate student | <input type="checkbox"/> Wait-listed |

Date _____ For the Department _____ Signature _____

Title _____

Action by the office of Graduate Studies and Research

Approved as recommended _____ Date _____ Dean of Graduate Studies and Research, Arts and Sciences

William and Mary does not discriminate unlawfully in any of its programs, procedures, or practices against any person on the basis of age, color, disability, national or ethnic origin, political affiliation, race, religion, gender, sexual orientation, or veteran or marital status.

Permanent address _____
 (Street & No) (City) (State) (Zip/Postal Code) (Country)

Telephone number _____
 (include area code) (Permanent) (Other – Cell Office Fax)

Temporary address _____
 (Valid until / /) (Street & No) (City) (State) (Zip/Postal Code) (Country)

Telephone number _____
 (include area code) (Temporary) (Other – Cell Office Fax)

Present occupation, if applicable _____ E-mail Address _____
 Personal College Office

Branch of U.S. Military (if applicable) _____ Dates of Service _____

Date of Birth _____ Place of Birth _____ U.S. Social Security No. _____
 (Mo/Day/Year) (Include city, state and country)

Country of Citizenship _____ Current Visa Type _____

If you are not a U.S. citizen, please indicate your status: Resident Alien Non-resident Alien; Type of Visa Required _____

If you are a U.S. citizen, do you claim Virginia domiciliary status for tuition purposes? If yes, please complete the enclosed form. Yes No
 (Note: The information is requested by the Federal government and does not affect admission to the College.)

If you claim Virginia domiciliary status, what is your City or County of legal home residence? _____
 City or County Zip Code

If you do not claim Virginia domiciliary status, what is your legal permanent home state and zip code? _____
 State Zip Code

(Official transcripts from the Registrar of each institution of higher education attended must be sent to the department/program to which you are applying.) Please include all information requested.

Institution	Institution Code	City/State	Begin Date	End Date	Degree	Major

Overall undergraduate GPA (indicate scale) _____ Major Field GPA _____ Graduate GPA (if applicable) _____

Do you wish to be considered for an assistantship, fellowship or scholarship offered by the College of the William and Mary?
 Yes No (Note: No other application is necessary. Your answer will not affect your application for admission.)

OPTIONAL: Provision of this information is not required. You are assured by school policy and by the Family Educational Rights and Privacy Act (FERPA) that the information will be confidential and accessible only to school officials, government agencies and others with a legitimate educational interest in the information.

Gender: Female Male
 Are you Hispanic or Latino? YES - Hispanic or Latino (includes Spain) NO

Regardless of your answer to the previous question, please check any one or more of the following groups in which you consider yourself to be a member:

- American Indian or Alaska Native
- Asian (includes Indian subcontinent and Philippines)
- Black or African American (includes Africa and Caribbean)
- White (includes Middle Eastern)
- Native Hawaiian or Other Pacific Islander

~~Applicants are required by the Committee on Graduate Studies to take the Graduate Record Examination (GRE) and Test of English as a Foreign Language (TOEFL) (required for students from non-English speaking countries). Applicants must register for the GRE directly with the Educational Testing Service (ETS), at GRE, ETS, P.O. Box 6004, Princeton, NJ 08541; (609) 771-7670; www.gre.org. To register for the TOEFL, contact TOEFL Services, ETS, P.O. Box 6151, Princeton, NJ 08541; 609-771-7100; www.toefl.org. Applicants must request ETS to send scores directly to the department/program to which they are applying.~~

If you have taken or are applying to take the GRE, please give the date: _____

Subject Test, give the date: _____ Field _____

If you have already received the scores, please list them:

GRE: Verbal _____ Quantitative _____ Analytical (or Analytical Writing) _____
Subject _____ Field _____

If you have taken or are planning to take the TOEFL, please list date: _____

If you have already received the scores, please list them:

TOEFL: Total Score _____ Test of Written English _____

If you have taken any other standard test of aptitude for graduate or professional school, please list test, date taken, and scores.

List experience as a teacher, research or laboratory assistant _____

Describe any teaching certificates you hold _____

List memberships in any professional organizations _____

List any vocational or technical courses that do not appear on your transcripts _____

List honors, prizes, and scholarships you have won _____

Describe any thesis, project, essay, or research experience that is pertinent. Please attach a list of publications if applicable.

Provide any additional information regarding your background, extracurricular activities, or general experience.

Applicants must request three persons qualified to judge their scholarly and professional ability to submit letters of recommendation on their behalf. Letters may be submitted in sealed envelopes with your application or may be sent separately to the Director of Graduate Studies in the department/program to which you are applying. List below the names and email addresses of your recommenders. The recommendation forms are included in this packet.

1. _____ E-mail _____

2. _____ E-mail _____

3. _____ E-mail _____

In the space below, write a statement composed in your own words describing your career plans and the reasons you wish to pursue graduate study. Attach extra sheets if necessary.

I certify that all information provided on this and all other application forms and materials has been prepared by me and is correct. Furthermore, if I have been suspended, expelled or convicted of a felony, I have attached a letter of explanation. If I enroll at William & Mary, I agree to abide by its Honor Code and the rules and regulations of the College. I understand that any untruthful statement in this application would subject me to immediate dismissal from the College, if I am admitted.

Date _____ Signature of Applicant _____



WILLIAM & MARY

CHARTERED 1693

Application to Determine Physical Residency and In-State Tuition Eligibility

Purpose is to determine: (1) applicant's current physical residency and (2) eligibility for in-state tuition pursuant to Section 23.1-500 through 23.1-510 of the *Code of Virginia*. Please complete and submit this form by the admission application deadline or before the first day of classes for the term. Answer all questions. Incomplete applications may cause significant processing delays. Supporting documents and additional information may be requested. Please contact the University Registrar's Office if you have questions.

Send this application, any supporting documents, and additional information to:
Office of the University Registrar, William & Mary,
P.O. Box 8795, Williamsburg, VA 23187-8795
Phone: (757) 221-2800 Fax: (757) 221-2151 Email: domicile@wm.edu

Part One — Applicant

1. Name (Last, First, M.)				Term/Year:	
W&M ID # or SSN:			Birth date:		
Email Address:			Telephone:		
2. My citizenship status is: (please check one)	<input type="checkbox"/> U.S. Citizen	<input type="checkbox"/> U.S. Dual Citizen	<input type="checkbox"/> U.S. Permanent Resident	<input type="checkbox"/> Non-US Citizen	
If Non-U.S. Citizen, please specify Visa Type:				Expiration Date:	

(Please provide all documentation that supports your visa status.)

Applicants who expect to hold an F-1 or J-1 visa are not eligible to establish Virginia domicile. Non-citizens without permanent resident status should know that only certain DHS statuses are eligible for Virginia in-state tuition privileges. See <http://www.schev.edu/index/tuition-aid/in-state-residency/financial-aid-policy-and-procedures> for more information.

3. Since July 2008, did you complete two years of high school in Virginia (public, private, homeschool or GED)? Yes No

4. Please check ALL that apply:

<input type="checkbox"/> a. I am a veteran or active duty member of the U.S. Armed Forces.
<input type="checkbox"/> b. I am married.
<input type="checkbox"/> c. I am a ward of the court or was a ward of the court until age 18.
<input type="checkbox"/> d. Both of my parents are deceased and I have no legal guardian.
<input type="checkbox"/> e. I have legal dependents other than a spouse (e.g. my own child).
<input type="checkbox"/> f. I will be 24 years old, or older, on the first day of classes of the semester for which I am applying.
<input type="checkbox"/> g. I am a graduate or post-baccalaureate student.

If you selected ANY of the choices for question 4, complete Part Two yourself (or, if you are dependent on a parent/guardian or spouse, then that person may complete Part Two).

If you cannot select a choice in question 4 but still wish to apply for in-state domicile as an "independent" student, or separately from that of your parent, you may complete Part Two as "Independent Student," attaching explanation and documentation to rebut the presumption of dependence or explaining why your domicile is different from that of your parent.

Otherwise, Part Two must be completed by your parent/ legal guardian.

Part Two — Independent Student, Parent, Legal Guardian, or Spouse

1. Please indicate one:	<input type="checkbox"/> Independent Student (skip to #7 below)	<input type="checkbox"/> Applicant's Parent	<input type="checkbox"/> Legal Guardian	<input type="checkbox"/> Applicant's Spouse
2. Name:				
3. Email Address:				
4. Phone Number:				
5. Parent/Guardian/Spouse:	Do you claim the applicant as a dependent on both federal and Virginia income tax returns?			<input type="checkbox"/> Yes <input type="checkbox"/> No
If no, please explain:				
6. Parent/Guardian/Spouse:	Will you have provided more than half of the applicant's financial support for at least twelve months prior to the term in which the applicant will enroll?			<input type="checkbox"/> Yes <input type="checkbox"/> No
If no, please explain:				
7. Your citizenship status	<input type="checkbox"/> U.S. Citizen	<input type="checkbox"/> U.S. Dual Citizen	<input type="checkbox"/> U.S. Permanent Resident	<input type="checkbox"/> Non-U.S. Citizen
If Non-U.S. Citizen, please specify Visa Type: (Please provide all documentation supporting your Visa status.)			Expiration Date:	



WILLIAM & MARY

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Physical Residency/In-State Tuition Eligibility, continued

8. Where have you lived for the past two years?

<input type="text"/>	to present	<input type="text"/>	<input type="text"/>	<input type="text"/>
mm/dd/yy		Street	City	State
<input type="text"/>	to	<input type="text"/>	<input type="text"/>	<input type="text"/>
mm/dd/yy		mm/dd/yy	Street	City
				State

9. Where have you been employed for the past two years?

<input type="text"/>	to present	<input type="text"/>	<input type="text"/>	<input type="text"/>
mm/dd/yy		Organization/Employer	City	State
<input type="text"/>	to	<input type="text"/>	<input type="text"/>	<input type="text"/>
mm/dd/yy		mm/dd/yy	Organization/Employer	City
				State

10. For the 12 months prior to the first term of enrollment:

a. Were you a registered voter in Virginia? Yes No

If yes, when did you register? Original Re-Registered

mm/dd/yy

If no, where are you registered? Not registered

b. Did you hold a valid driver's license in Virginia? Yes No

If yes, when was it issued? Original Renewal

mm/dd/yy

If no, what state issued your license? No license

c. Did you own/operate a motor vehicle registered in Virginia? Yes No

If no, where was it registered? Did not own/operate a motor vehicle

d. Will you have filed a Virginia state resident income tax return in the last tax year? Yes No

If no, where did you file? Did not file state income taxes last year

11. Are you an active duty member of the U.S Armed Forces or Virginia or US National Guard? Yes No

If yes, please submit a copy of the most recent:

- Military orders showing permanent duty station
- Proof that the applicant is your military dependent
- Document verifying residence in Virginia

12. Do you have the present intention to remain in Virginia? Yes No

13. Do you have a special domicile situation for which you would like to have a confidential phone conversation with a domicile officer? (Examples might include parent residency or citizenship conditions; complex family circumstances; or other) If so, we will call the number listed in #1 above. Yes No

I certify that the information I have provided is true.

<input type="text"/>	<input type="text"/>
Signature of Independent Student, Parent, Legal Guardian, or Spouse (No font or electronic signature)	Date

Non-Resident Provision: For at least one year prior to the term in which the applicant is planning to enroll:

If you have lived outside Virginia, were employed full-time in Virginia AND paid Virginia income taxes, you may be eligible for the non-resident provision. Please submit a letter of explanation and copies of your Virginia state and federal income tax returns to:

Office of the University Registrar
William & Mary
P. O. Box 8795
Williamsburg, VA 23187-8795

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