



Senior Citizen Tuition Assistance Agreement

(Space Available Basis Only)

Name: _____
Last
First
Mi

Address: _____
Street/PO Box
City
State
Zip Code

Student ID: _____ Date of Birth: _____ / _____ / _____

I hereby certify that I am at least 60 years old, a legal resident of the state of Virginia, have had a taxable income not exceeding \$23,850.00 for Virginia income tax purposes for the preceding year in which enrollment is sought and I am qualified for free tuition for credit courses under the Senior Citizens Higher Education Act, section 23.1-64 of the Code of Virginia. I understand RCC requires a copy of my Virginia income tax return for the preceding year.

I hereby certify that I am at least 60 years old, a legal domicile of the state of Virginia and I am qualified for free tuition to audit credit courses (not to exceed three non-credit or credit classes per semester) under the Senior Citizens Higher Education Act, section 23.1-64 of the Code of Virginia. There is no limit on annual income for audit of courses. *Students may have to pay for course materials and laboratory fees.*

Note: Senior Citizen Registration is on a space available basis.

Students using Senior Citizen Tuition Assistance may not register before the day of the first-class meeting.

Semester/Year: _____

Class Number	Course Prefix	Catalog Number	Section Number	Credits	Course Title

Student Signature: _____ Date: _____

Counselor/Advisor Approval: _____ Date: _____

For A&R Only

Age Verified

Domicile Verified

Income Verified

A&R Approval Date _____

Audit Grade added to SIS

For Business Office Only

Tuition: \$ _____ Fees: \$ _____

Total Due: \$ _____

Amount covered by agreement: \$ _____

Amount to be paid by student: \$ _____