



Undergraduate Post Baccalaureate Teacher Licensure

Out-of-State Tuition Waivers

at East Carolina University

(as allowed in G.S. 116-143.5)

ECU USE ONLY

Date _____
Signature _____

According to General Statute 116-143.5, public school teachers (or other personnel paid on the teacher salary schedule) who have maintained a domicile in North Carolina for less than one year but are employed **full-time** at a **public school** may receive the in-state tuition rate for courses relevant to teacher certification or professional development as a teacher.

This application is only for an out-of-state tuition waiver. The award of this waiver should not be interpreted as being classified as a "Resident for Tuition Purposes." You may apply for reclassification from a nonresident to a "Resident for Tuition Purposes" after you have resided in North Carolina for at least one year. The required "Residence and Tuition Status Application" may be obtained online at www.ecu.edu/gradschool.

Directions:

This application **MUST** be submitted prior to each semester for which you are applying for an out-of-state tuition waiver.

The application consists of three parts, and all parts **MUST** be completed in their entirety before the application will be considered. Enter "NA" if any question is not applicable to you.

All information must be typed or printed except for the signatures.

Return this form to: Center for Academic Services, Whichard Buidling (Room 201), East Carolina University, Greenville, NC 27858-4353 or fax to 252-328-6077.

Part I. To be completed by the applicant.

1. Applicant's Name _____

2. ECU ID # _____

3. This application is for Fall 20____ Spring 20____ 1st Summer 20____ 2nd Summer 20____
(Enter the year of the semester to which you are applying for an out-of-state tuition waiver. A new form MUST be completed for each semester in which you are taking courses.)

4. Current Mailing Address _____

5. Current Residential Address (Street Address) _____

6. Telephone number _____

7. Are you a citizen of the United States? Yes No

If you answered no, what visa classification do you hold? _____
(Please include a photocopy of your visa.)

8. Dates of contract for full-time employment as a teacher: (Month/Year)

Beginning _____

Ending _____

9. Employing School _____

10. Name of Principal _____

11. Declaration of the courses to be taken: "I wish to take the following courses at East Carolina University, and I declare that they are 'relevant to my teacher certification or professional development as a teacher.'"

Relevant Courses

(List course number and names.)

A. _____

B. _____

C. _____

D. _____

Applicant Signature _____ Date _____

NOTE: In addition to applying for a tuition waiver, ALL teachers must apply as either a Post Baccalaureate Teacher Licensure applicant a Readmit student before registering for the courses listed above. Applications can be downloaded at www.ecu.edu/cs-educ/teachers/alternative.cfm.

Part II. The principal **MUST** complete the following information before the application will be considered.

Principal's Statement

My signing this document verifies that

A. The applicant, _____
(Print name of teacher)

is a full-time employee at _____
(Print name of school)

such that the applicant qualifies for membership in the Teacher's and State Employee's Retirement System (TSERS) or would so qualify if employed on a permanent basis.

B. The applicant is paid on the North Carolina teacher salary schedule.

C. Each course listed in this form is relevant to the applicant's teacher certification or to professional development as a teacher.

Signature of Principal _____ Date _____

Name and Address of School _____

Telephone Number of School (_____) _____

Part III. To be completed by the applicant.

Residential Information

Please name each state where you did any of the following within the last 12 months. (Provide month/day/year of each act; if never done, write never.)

	(State)	(Month/Day/Year)
(a) Registered to vote	_____	_____
(b) Voted	_____	_____
(c) Acquired driver's license	_____	_____
Driver's license number	_____	
(d) Listed personal property for taxation	_____	_____
(e) Acquired ownership of property for use as a principal dwelling	_____	_____
(f) List the addresses at which you own and maintain personal property (clothing, furniture, cars, boats, savings accounts, jewelry, appliances, etc.) and give the percentage of value (of total personal property) maintained at each address.		

Address (City/State)

Percent at this Address

_____	_____
_____	_____
_____	_____

(g) List where and when all of your motor vehicles were registered or licensed.

Type of vehicle (List all)

(State where registered/licensed)

(Month/Day/Year)

_____	_____	_____
_____	_____	_____
_____	_____	_____

The car(s) or other motor vehicles that you maintain and operate in N.C. are owned by:

(Name) _____ (Address) _____

Insured in the name of: _____

(Address) _____

Thank you for your interest in East Carolina University, and best wishes in your future endeavors.