



# 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](http://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:** Office of Undergraduate Admissions, Tarrick Cox, Whichard Building (Room 106), East Carolina University, Greenville, NC 27858-4353 or fax to 252-328-6945.

#### 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](http://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.