



William & Mary  
Office of the University Registrar  
Blow Memorial Hall Room 240  
PO Box 8795  
Williamsburg, VA 23187-8795  
Phone (757) 221-2800 Fax (757) 221-2151  
registrar@wm.edu

# SENIOR CITIZEN EXEMPTION CERTIFICATE FOR AUDITORS (NOT FOR CREDIT)

## **GUIDELINES** (per the Senior Citizen's Higher Education Act of 1974, Code of VA 23.1-639 and 23.1-640)

To be eligible for the tuition exemption for audited courses (no credit received), the Senior must:

1. Be at least 60 before the semester begins.
2. Have had legal domicile in the Commonwealth of Virginia for at least one year prior to the first day of classes
3. Enroll in no more than three audited courses in a given semester with a tuition waiver.
4. Register for a course as an auditor only on a space-available basis after all award-seeking students have been accommodated. In general, this means that this form will be processed on or after the first day of classes and that registration will be completed by the University Registrar's Office.

## **INSTRUCTIONS**

1. Complete the *Student Information* portion of this form and the *Application for VA In-state Tuition*. Per § 23.1-500 through 23.1-510 of the Code of Virginia and the regulations thereunder, every institution of higher education located in Virginia is required to provide to the State Police the name, address, and other directory information of each student who enrolls with the institution. The intent of this law is to ensure compliance with the requirement under Virginia Law for certain individuals to register with local law enforcement.
2. Complete the Course Information on the bottom of this form and **obtain the instructor's signature for auditing**.
3. Submit the completed forms with proof of age to the Office of the University Registrar during the non-degree seeking student registration period. This form must be turned in no later than the last day of the Add/Drop period for the semester. Please see academic calendar at [www.wm.edu/registrar](http://www.wm.edu/registrar) for registration dates and information.

## STUDENT INFORMATION

Name: \_\_\_\_\_  
(Last) (First) (MI)

93# \_\_\_\_\_  
Student ID# (or provide your SSN to help us match this form to your records)

Term Info: \_\_\_\_\_  
(Semester) (Year)

Previously attended W&M? ☐ YES ☐ NO

Address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_  
Month Day Year

Phone #: (\_\_\_\_) \_\_\_\_\_ Sex: ☐ Male ☐ Female

Current E-Mail Address: \_\_\_\_\_@\_\_\_\_\_

Citizenship ☐ U.S. Citizen ☐ Permanent Resident ☐ Non-U.S. Citizen \_\_\_\_\_  
Country of Citizenship/Visa Status

Ethnicity: (Optional) ☐ Hispanic or Latino ☐ Not Hispanic or Latino  
Race: (Optional) ☐ American Indian or Alaska Native ☐ Asian ☐ Black ☐ Native Hawaiian or Other Pacific Islander ☐ White

## COURSE INFORMATION

Course Reference Number (CRN)	Course ID (Dept, Course Number, Section)	Credit Hours	Class Day(s) & Time(s)	Instructor's Name	INSTRUCTOR USE ONLY	
					Instructor's Signature (Required for auditors)	Pre-Requisite Override Instructor's Initials required if granted

**\*\* Permission to audit does NOT automatically grant permission to enter a closed course. This box MUST be initialed by the professor for registration into a closed course (maximum capacity has been reached).**

*I hereby certify that the information I have provided is true and complete to the best of my knowledge, and I agree to abide by the student regulations and the Honor Code of the College of William and Mary while I am enrolled.*

Student Signature \_\_\_\_\_ Date: \_\_\_\_\_

## OFFICE USE ONLY

Age Verified: Initials \_\_\_\_\_ Date \_\_\_\_\_

Domicile Verified: Initials \_\_\_\_\_ Date \_\_\_\_\_

Registration Processed Initials: \_\_\_\_\_ Date: \_\_\_\_\_

For Audit - Grade Mode changed to A: \_\_\_\_\_ Status Code changed to RE: \_\_\_\_\_

Copy to Bursar for Tuition Waiver: Initials \_\_\_\_\_ Date \_\_\_\_\_

Revised: 1/2025