



Residency Worksheet: Utah State University DVM Program

Admissions Office
TSC Room 102
0160 Old Main Hill
Logan, UT 84322-0160
435.797.1079
residency@usu.edu

College of Veterinary Medicine UtahStateUniversity

Instructions: Each applicant must submit this form along with a copy of their driver's license, voter registration, and vehicle registration to residency@usu.edu as proof of Utah domicile. If we are unable to determine your residency from this worksheet, you may be required to submit additional documentation. This includes, but is not limited to taxes, academic transcripts and/or verification of employment. If you are affiliated with the U.S. Military, have a parent that lives in Utah, or meet exemption requirements besides the general 12 Months rule, please review our website and email residency@usu.edu. Residency certification is due (all required documentation submitted to the USU Residency Office) by **September 15, 2026** for admission to the program in fall 2027.

Please Print Clearly

Full Student Name: _____

Student A# (if known): _____ Date of Birth (mm/dd/yyyy): _____

Present Address: _____

Permanent Address: _____

Email Address: _____ Primary Phone Number: (____) _____ - _____

Citizenship: U.S. Citizen Permanent Resident Other, if yes Visa type: _____

Are you a resident of Utah? Yes No

If yes, please list most recent dates you have continuously been in Utah: _____

Driver's License State: (provide copy) _____ Driver's License #: _____

In what State are you registered to vote? (provide copy) _____

If you have a vehicle for your use, in what State is your vehicle registered? (provide copy) _____ License Plate #: _____

Do either of your parents reside in Utah? Yes No

If yes, how long have they resided in Utah? _____

In what State(s) did you file taxes in the prior calendar year? _____

Did anyone claim you as a dependent for tax purposes? Yes No

If yes, what is their state of residency? _____

Have you ever participated in WUE, WICHE, Alumni Legacy, or "Good Neighbor" programs? Yes No

If yes, state program and dates of participation: _____

What have you been doing (e.g. employment, school, military, etc.) and where have you been for the past three years?

From (month/year) To (month/year)	Employer, School, or Activity	City and State
_____	_____	_____
_____	_____	_____
_____	_____	_____

Applicant Signature:

"I certify that all information submitted on this application is complete and true to the best of my knowledge. Knowingly falsifying or withholding information may result in loss of credit, revocation of admission, or dismissal from Utah State University."

Student Signature: _____ Date: _____

For Office Use Only:			
Documentation Submitted?	Yes	No	Approved: _____ Denied: _____ Date: _____