

## **Shreiber School of Veterinary Medicine Domicile Verification Form**

Important Information About This Form: Applicants to Rowan University's Shreiber School of Veterinary Medicine ("SSVM") do not qualify as in-state residents for admissions purposes unless they can demonstrate domicile in New Jersey for at least twelve (12) months immediately prior to enrollment. Domicile is defined as the place where a person has his or her true, fixed, permanent home and principal establishment, and to which, whenever he or she is absent, he or she has the intention of returning. Residence that is established solely for the purpose of attending a particular educational institution does not constitute domicile. Domicile will be determined based on documentation submitted.

SSVM applicants who are U.S. citizens, are not affiliated with the military, and indicate on their application for admission that their state of legal residency is New Jersey must complete this form and attach the required documentation. Applicants may attach supplemental documentation at their discretion.

\_\_\_, certify the following: ١,

Print Name

- 1. New Jersey has been my state of legal residency / domicile for at least the previous twelve months.
- 2. My residence in New Jersey for the past twelve months was not established for the purpose of attending a particular educational institution.
- 3. I have attached at least two of the following, each of which demonstrates that I will have been domiciled in New Jersey for at least twelve months prior to the date of my enrollment to SSVM:
  - a. Income tax return for the most recent tax year;
  - b. New Jersey driver's license or non-driver's identification card;
  - c. New Jersey voter registration card;
  - d. Banking documents;
  - e. Utility bills;
  - f. Documents from previous institution of higher education recognizing my New Jersey domicile;
  - g. Copy of deed of ownership, or of a current long-term lease (six years of longer), on a permanent residence in New Jersey.

I certify that the above information is true to the best of my knowledge. I certify that the attached documents are true and accurate copies. I understand that withholding pertinent information requested on this form or providing false or misleading information may be grounds to deny me admission to SSVM, expel me from SSVM after I have been admitted, or constitute grounds to reconsider my New Jersey residency for admission and/or tuition purposes.

Signature

Date

## **Shreiber School of Veterinary Medicine**

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