

**NEBRASKA RESIDENT CERTIFICATION FOR IOWA STATE UNIVERSITY COOPERATIVE
VETERINARY MEDICINE PROGRAM**
UNIVERSITY OF NEBRASKA-LINCOLN

Full Legal Name: _____
Last First Middle (Suffix-Jr., ect.)

Current Address: _____
Street City State Zip code

Phone Number: _____

NEBRASKA RESIDENT CERTIFICATION INSTRUCTIONS

1. DETERMINE WHICH CATEGORY FITS YOUR CIRCUMSTANCES:

- A. Students who are attending a University of Nebraska system campus.

NUID#: _____

Name of Campus: _____

- B. Students who graduated from a Nebraska High School and are not attending a University of Nebraska campus. (Please attach a copy of your High School diploma with this form.)

Other Last Names Used: _____

Social Security Number: _____

- I've attached my High School diploma.

- C. Students not attending a University of Nebraska campus nor are a graduate of a Nebraska High School should document their residency by filling out the *Application for Residence Classification for Tuition Purposes* in addition to this form. To review and print the application and determine the appropriate category visit: www.admissions.unl.edu/residency .

Other Last Names Used: _____

Social Security Number: _____

- I've attached a completed *Application for Residence Classification for Tuition Purposes* with the appropriate documentation for my category.

2. MAIL COMPLETED FORMS AND SUPPORTING DOCUMENTS TO:

NEBRASKA RESIDENT CERTIFICATION
OFFICE OF UNDERGRADUATE ADMISSIONS
UNIVERSITY OF NEBRASKA-LINCOLN
1410 Q STREET
LINCOLN, NE 68588-0417

QUESTIONS: Contact Patrick McBride with the University of Nebraska-Lincoln Office of Admissions. He can be reached at 402-472-2023 or pmcbride1@unl.edu.

8/24/2012