IOWA BOARD OF VETERINARY MEDICINE WALLACE STATE OFFICE BUILDING 502 E. 9th STREET DES MOINES, IOWA 50319 (515) 281-8617

VETERINARY TECHNICIAN APPLICATION BY ENDORSEMENT

I,	ł	herewith apply to be regist	tered as a veterinary technician in Iowa by
	the following statem		tions in conformance with the requirements of
NAME IN FULL			
ADDRESS Street, P. O. Box, City, State, Zip Code			
	Street	t, P. O. Box, City, State, Zip	Code
I attended two years of A	VMA accredited sch	nool of veterinary technology	y at:
		Name & Address	
and graduated in VETER	INARY TECHNOL	LOGY on	Data
			Date
	nission to an examin		y technologist revoked or suspended, that no practice as a veterinary technologist has been
State	Date	Reason:	
Have you ever been conv	icted of a felony? If	f so, give details:	
			:
Are you a citizen of the U	Inited States? Yes_	No	
I CERTIFY THAT THE	FOREGOING IS TF	RUE AND CORRECT.	
Phone		Signature	
Date		Social Security Number	

INFORMATION: This application with remittance of \$25.00 (which is the application fee) and a copy of the diploma (to be no larger than 8 ½ inches by 11 inches) or an official transcript from the school must be filed with the Iowa Board of Veterinary Medicine, Wallace State Office Building, 502 E. 9th Street, Des Moines, Iowa 50319. Incomplete or mutilated applications are not acceptable. All checks must be made payable to the Iowa Board of Veterinary Medicine.

RETURN THIS APPLICATION TO:

Iowa Board of Veterinary Medicine Wallace State Office Building 502 E. 9th Street Des Moines, Iowa 50319 Beginning January 1, 2021, you may be eligible to apply for a fee waiver if you meet the following requirements. This fee waiver will only affect the license/registration fee and does not apply to renewals. :

- 1) An applicant for initial licensure is eligible for a waiver of initial licensing fees if the applicant's household income does not exceed 200% of the federal poverty income guidelines and the applicant is applying for a license/registration for the first time.
- 2) To determine eligibility, you must first identify the number of individuals in your <u>household</u>. Once this is determined, reference the <u>Federal Poverty Level</u> and identify the income that matches the number of individuals in your household. If your household income, as reported on your most recent federal tax return, is less than the identified value, you are eligible for the one-time fee waiver.

If you are eligible, please answer the following questions:

- 1) Do you wish to apply for a fee waiver? Yes No
- 2) Is your adjusted gross household income less than 200% of the Federal Poverty Level? Yes No
- 3) Are you applying for this license/registration type for the first time? Yes No

If all three of your answers above are "yes", see below:

- 1) I attest that my household income does not exceed 200% of the federal poverty income guidelines and agree to submit documentation of one of the following to verify my household income:
 - a. If you are married and filed separately, you will need to submit the Federal Tax Return for both your spouse and yourself.
 - b. If you were claimed as a dependent on another person's tax return, you will need to submit the Federal Tax Return for the tax filer who claimed you as a dependent.
 - c. Or other that you wish to include

Signature

Please upload/attach requisite documents.