

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

**VETERINARY TECHNICIAN APPLICATION BY ENDORSEMENT**

I, \_\_\_\_\_ herewith apply to be registered as a veterinary technician in Iowa by endorsement and submit the following statements regarding my qualifications in conformance with the requirements of the Iowa Board of Veterinary Medicine.

NAME IN FULL \_\_\_\_\_

ADDRESS \_\_\_\_\_  
Street, P. O. Box, City, State, Zip Code

I attended two years of AVMA accredited school of veterinary technology at: \_\_\_\_\_

\_\_\_\_\_  
Name & Address

and graduated in VETERINARY TECHNOLOGY on \_\_\_\_\_  
Date

I further state I have never had my certificate to practice as a veterinary technologist revoked or suspended, that no application either for admission to an examination or for a certificate to practice as a veterinary technologist has been denied me except as follows:

State \_\_\_\_\_ Date \_\_\_\_\_ Reason: \_\_\_\_\_

Have you ever been convicted of a felony? If so, give details: \_\_\_\_\_

I am licensed to practice as a veterinary technician in the following states: \_\_\_\_\_

Are you a citizen of the United States? Yes \_\_\_\_\_ No \_\_\_\_\_

I CERTIFY THAT THE FOREGOING IS TRUE 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. 9<sup>th</sup> 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. 9<sup>th</sup> 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 [household](#). Once this is determined, reference the [Federal Poverty Level](#) 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 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*

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**Signature**

Please upload/attach requisite documents.