

Office of Academic Affairs (0442) VMCVM, Phase III, Suite 226 Blacksburg, VA 24061 Phone: 540-231-1184 | Fax: 540-231-9290 Email: dvmadmit@vt.edu www.vetmed.vt.edu

ACKNOWLEDGMENT OF "AT LARGE" STUDENT STATUS AND PAYMENT OBLIGATIONS

As a prospective DVM student, I acknowledge that I am a legal resident of ______. (Please type in state of legal residence.)

Under Commonwealth of Virginia statutes if you are accepted to the VMCVM DVM program, you will be required to individually assume responsibility as an "accountable atlarge student" (out of state student) during my entire enrollment in the VMCVM DVM professional program.

This means if you are enrolled in the DVM program, you must pay VMCVM tuition and fees in the amount set by the Board of Visitors of Virginia Tech. https://www.bursar.vt.edu/tuition-fee-rates/tuition-fees.html.

Out-of-state students and parents should be aware that residence or physical presence in Virginia primarily to attend Virginia Tech does not entitle students to in-state tuition rates for future terms. Domicile should be established before one enters the university.

If you are accepted as an out of state student to the Virginia Maryland College of Veterinary Medicine, the Commonwealth of Virginia does not permit changing your residency. You may find further information within the Commonwealth of Virginia's Code, Title 23.1, Chapter 5, Section 23.1-502.

I acknowledge, understand, and accept the consequences of my classification as an "At Large" student as set forth above.

,, acknowledge these terms.

Date of signature: _____



