

Colorado School of Public Health

Western Regional Graduate Program (WRGP) Verification Form

WRGP status can be given to students who are residents of the following: Alaska, Arizona, California, Hawaii, Idaho, Montana, Nevada, New Mexico, North Dakota, Oregon, South Dakota, Utah, Washington, Wyoming, and Commonwealth of the Northern Mariana Islands (CNMI).

Students given this status will be charged the in-state, rather than the out-of-state tuition rate. This does not include any fees. All fees will need to be paid in-full by the student.

INSTRUCTIONS: Please complete the form and return it via email to ColoradoSPH.Admissions@CUAnschutz.edu. You are required to include a copy of your driver's license; the form cannot be processed without it. Your tuition classification form also needs to be completed for this form to be processed. Refer to the New Student Checklist for details.

Last Name: _____ First Name: _____ MI: _____

CSPH Program of Acceptance (MPH, DrPH, Certificate): _____ Home Campus: _____

Former Maiden Name (if applicable): _____ Date of Birth: _____

Place of Birth (city/state): _____ Sex: M ___ F ___ Ethnicity (optional): _____

Please indicate term/year for which you are starting your CSPH program: Semester: _____ Year: _____

Please indicate the WRGP eligible state that you are claiming: _____

Preferred Mailing Address: _____

City: _____ State: _____ Zip: _____ Phone: _____

Permanent Residence Address: _____

City: _____ State: _____ Zip: _____ Email: _____

You must answer EACH of the following questions (1-12):

1. Are you a citizen of the United States? _____

By Birth? _____ Naturalization? _____ Date of Naturalization _____

*****Copy of front and back of Permanent Resident Alien card must be attached**

2. Are you in the United States on a Visa? _____ Type of Visa: _____ Date of Visa: _____

*****Copy of front and back of Visa must be attached**

3. Are you currently registered to vote? _____ Where? _____

4. Have you ever registered to vote in Colorado? _____ When/Where? _____

5. Please list the states in which you have filed an income tax return in the last two years: _____

6. Have you ever filed a Colorado Income Tax Return? _____ If so, what year(s)? _____

7. Do you own a car? _____ Registered in what state? _____ Date Registered: _____
8. Have you ever registered a car in Colorado? _____ If so, what year(s)? _____
9. Please specify your driver's license number: _____ What state is it registered in: _____

*****Copy of valid driver's license must be attached**

10. Have you ever obtained a Colorado Driver's License: _____ If so, what year? _____
11. List each residence address you have had in the past two years, including your current address, and the dates of your residence at each: (include extra pages, if necessary)

<u>Address</u>	<u>City</u>	<u>State</u>	<u>Dates of Residence</u>

12. List employment history for the past two years, including, if applicable, your present employer.

_____ <i>(Name of Employer)</i>	_____ <i>(City/State where you worked)</i>	_____ <i>(Dates of Employment)</i>
_____ <i>(Name of Employer)</i>	_____ <i>(City/State where you worked)</i>	_____ <i>(Dates of Employment)</i>
_____ <i>(Name of Employer)</i>	_____ <i>(City/State where you worked)</i>	_____ <i>(Dates of Employment)</i>
_____ <i>(Name of Employer)</i>	_____ <i>(City/State where you worked)</i>	_____ <i>(Dates of Employment)</i>

Please retain a copy for your records.

For CSPH Office Use Only	
CSPH Approval	Date