

VMCAS 2019 – SAMPLE APPLICATION



Welcome to VMCAS

The Association of American Veterinary Medical Colleges (AAVMC) coordinates the national and international affairs of all 30 veterinary medical colleges in the United States and 5 in Canada, 8 departments of veterinary science, 7 departments of comparative medicine, 1 animal medical center, and 14 international colleges of veterinary medicine. The AAVMC fosters the teaching, research and service activities of its members, both nationally and internationally. The AAVMC (www.aavmc.org) sponsors the Veterinary Medical College Application Service (VMCAS) which provides application services for 29 US veterinary medical colleges, 2 Canadian and 10 international colleges of veterinary medicine.

The AAVMC's mission is to improve the quality of life for people and animals by advancing veterinary medical education, improving animal health and welfare, strengthening biomedical research, promoting food safety and food security, and enhancing environmental quality.

Sign in with your username and password below. First time here? Select Create an Account to get started.

Sign In

Create an Account

[Forgot your username or password?](#)

[Reapplying to VMCAS?](#)

Create an Account

The information below will be provided to the admissions offices at the programs to which you apply. Please provide complete and accurate information. Within the application you will be able to specify additional addresses and alternate name details.

* Indicates required field.

Your Name

Title	<input type="text"/>
* First or Given Name	<input type="text"/>
Middle Name	<input type="text"/>
* Last or Family Name	<input type="text"/>
Suffix	<input type="text"/>
Display Name	<input type="text"/>

Contact Information

* Email Address	<input type="text"/>	Work ▼
* Confirm Email Address	<input type="text"/>	
* Preferred Phone Number	<input type="text" value="(201) 555-5555"/>	Mobile ▼
Alternate Phone Number	<input type="text" value="(201) 555-5555"/>	Mobile ▼

Text Notifications

I agree to the [Terms of Service](#) and authorize text messages to my mobile number above.

Username and Password

Your username must be at least 6 characters. Your password must be a minimum of 8 characters and contain at least one lower and upper case letter, one number, and a special character.

* Username	<input type="text"/>
* Password	<input type="password"/>
* Confirm Password	<input type="password"/>
* Security Question	<input type="text" value="Please select a question..."/>
* Security Answer	<input type="text"/>

Terms and Conditions

Terms of Use

These Terms of Use constitute an agreement ("Agreement") between you and Liaison International, Inc. (the "Company"), the owner of the website located at www.liaison-intl.com (the "Site"). Your use of the Site and/or the services provided on the Site (the "Services") constitutes your agreement, without limitation or qualification, to be bound by and to comply

* I agree to these terms

Create my account

My Application Add Program Submit Application Check Status

My Application

This dashboard is your application home providing access to each part of the application you need to complete and a high level overview of your progress.

Latest Notifications

VMCAS application - Welcome! Today

View My Notifications

<h3>Personal Information</h3> <p>0/1 Sections Completed</p>	<h3>Academic History</h3> <p>2/4 Sections Completed</p>
<h3>Supporting Information</h3> <p>0/3 Sections Completed</p>	<h3>Program Materials</h3> <p>0/1 Sections Completed</p>

My Application Add Program Submit Application Check Status

Location: School:

Show Available Programs Past Programs Future Programs

PROGRAM NAME	LEVEL	START TERM	START YEAR	CITY	STATE	DEADLINE
Lincoln Memorial University						
<input checked="" type="checkbox"/> Test_program	DVM	Fall	2019	Harrogate	TN	09/29/2018

VMCAS WILL NOT ACCEPT PRINTED APPLICATIONS – SAMPLE ONLY

[My Application](#)
[Add Program](#)
[Submit Application](#)
[Check Status](#)

Review your program selections here, check on status of individual program tasks, and pay for your program selections.

Once your application is submitted, no changes or refunds can be made.

APPLICATIONS READY FOR SUBMISSION

0

TOTAL FEE(S)

\$210

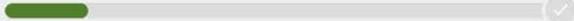
Submit All

Sort By: **Deadline**

Lincoln Memorial University

Test_program

Deadline 09/29/2018



Submit

[My Application](#)
[Add Program](#)
[Submit Application](#)
[Check Status](#)

Overall Status

Transcripts Arrived 0 of 1

HARVARD UNIVERSITY January 2022 - Still Attending	Not Arrived
--	-------------

My Programs

	Application Status	Download Application (PDF)
Test_program Lincoln Memorial University	In Progress	

My Application

This dashboard is your application home providing access to each part of the application you need to complete and a high level overview of your progress.

Latest Notifications

🔄 VMCAS application - Welcome! Today ➔

[View My Notifications](#)



Personal Information

0/7 Sections Completed

- Release Statement
- Biographic Information
- Contact Information
- Citizenship Information
- Parent/Guardian
- Race & Ethnicity
- Other Information

Release Statement

You may update this information at any time prior to submission. Once you have submitted, the information on this page cannot be edited.

* Indicates required field.

Code of Conduct

* In accordance with the ideals and principles of the veterinary profession, applicants to schools and colleges of veterinary medicine are expected to conduct themselves in a manner that demonstrates responsibility, integrity, veracity, and good judgment. Schools and colleges of veterinary medicine seek to admit applicants who possess a high level of professionalism and potential.

Applicants will demonstrate these qualities by taking ownership of all aspects related to the application and admissions processes. Applicants will follow these guidelines:

1. Review the admissions requirements and application procedures for both VMCAS and for each designated veterinary medical school or college to which the applicant plans to apply.
2. Communicate with both VMCAS and admissions office personnel in a professional and timely manner.
3. Provide all required information on the VMCAS application accurately and by the September 15 deadline.
4. Provide all required information on the supplemental applications/questions accurately and by the school-specific deadlines.
5. Regularly check the VMCAS and school-specific status pages to ensure that your applications are complete and follow up in a timely manner on any missing items.
6. Regularly login to the VMCAS application to check for important messages.
7. Regularly check your email for important messages from the schools and colleges to which you applied.
8. Notify each admissions office in a timely manner if you do not plan to attend an admissions interview which has been offered to you.
9. Respond to all offers of admission by the April 15 Common Reply Date, including the schools and colleges you have decided not to attend.
10. Abide by all VMCAS and school-specific deadlines

Indicate your understanding and acceptance of the terms described above by checking this box.

Application Certification

- * I certify that all the information and statements I have provided in this application are correct and complete, including any statement regarding my state of residence. I certify that, as required in the application, I have read and understand all application instructions, identified all sources of information related to my college attendance and credits, all actions by a university or other institution, and all information of any criminal record in any jurisdiction. I have read and understand all notices contained within the application and the VMCAS Web page informing me of my obligation to provide true and complete answers to all questions. I understand that withholding pertinent information requested on this application, or giving false information, may be grounds to deny me admission to a veterinary college participating in VMCAS or may be grounds to expel me from such college after I have been admitted. I have read and understand the VMCAS Application Deadline Policy and the VMCAS Refund Policy.

Indicate your understanding and acceptance of the terms described above by checking this box.

- * I give my permission to officials at all institutions that I have attended to release information requested by any college of veterinary medicine to which I have applied.

Indicate your understanding and acceptance of the terms described above by checking this box.

Final Reminders

- * I have read and understand the AAVMC Privacy Policy? (http://www.aavmc.org/data/files/students_advisors/aavmcprivacypolicy.pdf)

I have registered three evaluators in the Evaluations section. I understand that I must at least register three evaluators in the Evaluations section.

I understand that VMCAS only accepts electronic evaluations. I understand that it is my responsibility to check with school sites to verify evaluation requirements.

I understand that for electronic evaluations, I will need to verify that my evaluators emails are correct and that they have received the email request once I have created them in the system.

I understand that I am required to send official transcripts of all coursework taken prior to Fall 2018 directly to VMCAS. Test scores should be sent to the appropriate GRE code, as described in the VMCAS instructions. Supplemental applications and supplemental fees (if applicable) and final Fall 2018 & Spring 2019 transcripts are to be sent directly to my designated colleges.

I understand that VMCAS does not provide refunds under any circumstances. This includes accidentally choosing the wrong school or missing the deadline. I understand that by sending payment to VMCAS, I am signaling my intent for VMCAS to process my materials, regardless of whether they are completed or not.

I understand that once I submit my application, I cannot make any changes to my submitted information. I agree to contact my designated school(s) with any changes to my contact information.

I understand that I will need to record and provide my VMCAS ID whenever contacting VMCAS for questions or concerns.

Indicate your understanding and acceptance of the terms described above by checking this box.

Advisor Release

* By answering Yes, you authorize VMCAS to release selected information regarding your VMCAS application and admission status to the health professions advisor and the health professions advisory committee of the post-secondary institution(s) that you have attended. By releasing your information, your advisor is better able to assist you in the admissions process, as well as better guide other students in the future. You cannot make changes to this item after you submit your application to VMCAS. Check to authorize to release your application's academic information and admission status to designated health professions advisors at the schools you have previously attended.' Your personal and financial information will remain confidential at all times; and your personal statement or disciplinary actions listed on your application will not be viewable. Advisors may use this information to help benchmark acceptance rates from their programs and improve their interactions with future applicants.

Yes No

Biographic Information

You may update your biographic information at any time before or after submission.

* Indicates required field.

Your Name

To make changes to your name, go to the [Profile Section](#)

First or Given Name	<input type="text" value="Tony"/>
Middle Name	<input type="text"/>
Last or Family Name	<input type="text" value="Wynne"/>
Suffix	<input type="text"/>

Alternate Name

* Do you have any materials under another name (for example a maiden name, middle name or nickname)?

Yes No

Sex

* What is your sex?

Male Female A gender not listed here Decline to state

Birth Information

* Date of Birth	<input type="text" value="MM/DD/YYYY"/>
* Country	<input type="text" value="Select Country"/>
* City	<input type="text"/>
* State	<input type="text" value="Select State"/>
* County	<input type="text" value="Select County"/>

Contact Information

You may update this section of the application at any time. Be sure to keep your contact information up-to-date throughout the application process.

* Indicates required field.

Current Address

* Street Address 1	<input type="text"/>
Street Address 2	<input type="text"/>
* City	<input type="text"/>
* Country / Territory	<input type="text" value="Select a Country"/>
* State/Province	<input type="text" value="Select a State"/>
* County	<input type="text" value="Select a County"/>
* Zip/Postal Code	<input type="text"/>
Approximate Date through which current address is valid	<input type="text" value="MM/DD/YYYY"/>

* Is this your permanent address?

Yes

No

What is your permanent address?

* Street Address 1

Street Address 2

* Country / Territory

* State/Province

* County

* City

* Zip/Postal Code

Phone

To make changes to your phone number, go to the [Profile Section](#)

* Preferred Phone Number

Alternate Phone Number

Email

To make changes to your email, go to the [Profile Section](#)

* Email

Citizenship Information

You may update this information at any time prior to submission. Once you have submitted, the information on this page cannot be edited.

* Indicates required field.

United States Citizenship Details

- * U.S. Citizenship Status
- * Country of Citizenship
- * Do you have dual citizenship?
 Yes No

Residency Information

- * Legal State of Residence
- * Legal County of Residence
- * How long have you been a resident of your state?
- * How long have you lived in the U.S.?

Visa Information

- * Do you have a U.S. Visa?
 Yes No

Citizenship Information

You may update this information at any time prior to submission. Once you have submitted, the information on this page cannot be edited.

* Indicates required field.

United States Citizenship Details

- * U.S. Citizenship Status
- * Country of Citizenship
- * Do you have dual citizenship?
 Yes No

Residency Information

- * Legal State of Residence
- * Legal County of Residence
- * How long have you been a resident of your state?
- * How long have you lived in the U.S.?

Visa Information

- * Do you have a U.S. Visa?
 Yes No

Parent/Guardian

You may update this information at any time prior to submission. Once you have submitted, the information on this page cannot be edited. 

* Indicates required field.

Parent Info

* Relationship to Applicant

* First Name

* Last Name

Gender

Male Female Decline to State

* Living?

Yes No Don't Know

Occupation

Occupation

Parent Residency

Country of Legal Residence

United States Canada Other

State

County

Parent Education

Highest Education Level

Highest Education Level School

Parent Household

Is this parent in your primary household?

Yes No

Your primary household is where you lived during the majority of your life from birth to age eighteen.

Race & Ethnicity

You may update this information at any time prior to submission. Once you have submitted, the information on this page cannot be edited.

* Indicates required field.

Ethnicity

Do you consider yourself to be of Hispanic/Latino Origin?

Race

Please select one or more of the following groups in which you consider yourself to be a member.

- American Indian or Alaska Native
- Asian
- Black or African-American
- Native Hawaiian or Other Pacific Islander
- White

Other Information

You may update this information at any time prior to submission. Once you have submitted, the information on this page cannot be edited.

* Indicates required field.

Language Proficiency

* What is your Native Language?

+ Add Another Language

Military Status

Indicate your anticipated United States Military status at the time you enroll:

Felony

* Have you ever been convicted of a Felony?

Yes No

Misdemeanor

* Have you ever been convicted of a Misdemeanor?

Yes No

Academic Infraction

* Have you ever been disciplined for academic performance (e.g. academic probation, dismissal, suspension, disqualification, etc.) by any college or school?

Yes No

* Have you ever been disciplined for student conduct violations (e.g. academic probation, dismissal, suspension, disqualification, etc.) by any college or school?

Yes No

Explanation Statement

The explanation statement can be used to record information that could not be listed anywhere else within the web application, such as missing parental information, and disciplinary action(s) which require detailed explanation. This section can also be used to provide the admissions committee(s) additional information that you consider vital to your application. Your explanation statement should be clearly and succinctly written – 2000 characters (including spaces) have been allotted for this purpose. Examples of pertinent information might include explanations about interruptions in your studies or experiences, unique circumstances you have faced, or reasons for decisions you have made.

0/2000

Additional Information

* Current Student Status

* Student Reported GPA from Primary School

* Has there been any interval longer than 3 months during which you were not enrolled as a student or employed?

Yes No

If Yes, provide an explanation including the duration and how you spent the time.

0/360

* Are you a 'WICHE' applicant?

Regional Application (MANDATORY)

You are a WICHE (Western Interstate Commission for Higher Education) applicant if you are a resident of Arizona, Hawaii, Montana, Nevada, New Mexico, North Dakota, or Wyoming AND if you have applied for and/or received notice from the certifying office in your state that you are a duly certified applicant for the Professional Student Exchange Program. For further information, contact your WICHE State Certifying Office whose contact information is listed at <http://www.wiche.edu/psep/cert-off>. Additional information about how WICHE PSEP applicants are selected for support in veterinary medicine is located at <http://wiche.edu/info/publications/HowWICHEselectsPSEPstudents.pdf>.

Yes No

Other Applications

If you are currently applying to veterinary schools OTHER than the one(s) entered in this application, please select from the list below.

Application 1

Application 2

Application 3

Application 4

Application 5

Application 6

Previous Applications

If you have previously applied to one or more colleges of veterinary medicine through VMCAS, list all entering years for which applications were made.

Year A:

Year B:

Year C:

Year D:

Year E:

First Generation College Student

* A first generation student is defined as a first generation student for which neither parent / legal guardian has completed a bachelor's degree. Are you a first generation student?

Yes

No

Essays

- * There are many career choices within the veterinary profession. What are your future career goals and why?

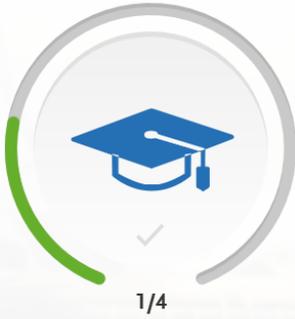
0/1500

- * In what ways do veterinarians contribute to society and what do you hope to contribute?

0/1500

- * Consider the breadth of society which veterinarians serve. What attributes do you believe are essential to be successful within the veterinary profession? Of these attributes, which do you possess and how have you demonstrated these in the past?

0/2000



Academic History

1/4 Sections Completed

High School Attended

Colleges Attended

Transcript Entry

Standardized Tests

High School Attended

Please add information about the high school where you obtained your degree (or will soon receive your degree). If required by the schools you are applying to, be sure to request a transcript by filling out the Transcript Request Form.

 Add Your High School

High School Attended

Add Your High School

Enter details from the high school where you received your degree below.

* Indicates required field.

* What high school did you attend?

* City

* State

* Did you graduate from this high school?

 Yes No

Colleges Attended

To add colleges, click the Add a College button below. You may update the information in this section at any time prior to submission.

Please make sure to add all your degrees before submitting.

If you are re-applying this cycle, you may add new colleges attended, but cannot update or delete previously listed colleges.

 Add a College

Colleges Attended

Add Your Colleges



Please add all undergraduate, graduate or professional institutions you attended or are currently attending.

You may update the information in this section at any time prior to submission.

* Indicates required field.

* What college did you attend?

* Did you obtain or are you planning to obtain a degree from this college?
 Yes No

* Degree Info
 Degree Awarded Degree In Progress 

* What type of degree are you planning to earn?
* When will you earn that degree?

* What is your major? What is your minor?

Check if you were a double major

* What type of term system does this college use?
 Quarter Semester Trimester

When did you attend this college?

Select the first and last semesters that your transcript covers, even if there were breaks between semesters.

* First Semester

Select Sem... ▼ Select Mo... ▼ Select Year ▼

* Last Semester

Select Se... ▼ Select M... ▼ Select Year ▼

Check if you are still attending this college

MY ATTENDED COLLEGES

HARVARD UNIVERSITY



January 2022 - Still Attending | Semester System | Artist Diploma Degree Expected: January 2022

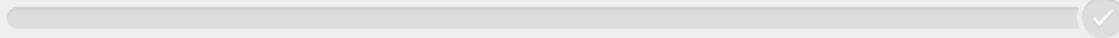
Download Transcript Request Form

Transcript Entry

Enter transcript information exactly as it appears on your transcript. Your transcript details will be reviewed by a quality assurance team. If there are inaccuracies, your application will be sent back to you, and this will result in delays in submitting your application. All courses must be included, even if you did poorly or later repeated the course. If you have transfer credits, enter these credits from the institution where you originally took the course.

After you enter transcript information for all colleges attended, you will complete Transcript Review. In Transcript Review you will be asked to identify additional attributes about your coursework including Primary College and courses that are Repeated, Advanced Placement, Other Tests, Honors, and Study Abroad.

HARVARD UNIVERSITY



Start

HARVARD UNIVERSITY Transcript

Winter January 2022 - Still Attending

* Indicates required field.



Alright, start by adding a semester.

+ Add A Semester

* Indicates required field.

*TERM	*YEAR	*ACADEMIC STATUS	*COMPLETION STATUS
Select	Select	Select	Select

+ Add A Course + Add A Semester Cancel Save

Enter your courses first. For any courses you took that fall outside of the typical academic statuses, choose Freshman. After you enter all courses, you will start Transcript Review where you will be asked to identify courses that are Repeated, Advanced Placement, Other Tests, Honors, and Study Abroad.



Prerequisites Information:

Some programs to which you are applying have prerequisites. Please enter coursework that fulfills these prerequisites.

Lincoln Memorial University

Test_program

Advanced Science Electives ⓘ Social Sciences ⓘ English ⓘ Physics ⓘ

General Chemistry ⓘ Organic Chemistry ⓘ Biochemistry ⓘ Genetics ⓘ Biology ⓘ

Winter 2022 Freshman



+ Add A Course + Add A Semester



+ Add A Course

* COURSE CODE	* COURSE TITLE	* SUBJECT	* CREDITS	* GRADE	CAS GRADE	
<input type="text"/>	<input type="text"/>	Select Subject	<input type="text"/>	<input type="text"/>	<input type="text"/>	
e.g., BIO 101	e.g., Introduction to Biology		e.g., 3.00		e.g., 85 or B	

[+ Add A Course](#) [+ Add A Semester](#) [Cancel](#) [Save](#)

Winter 2022 Freshman					
* COURSE CODE	* COURSE TITLE	* SUBJECT	* CREDITS	* GRADE	CAS GRADE
Math101	Intro to Math	Mathematics	3.00	A	A

Success! Now add the rest of your courses, making sure to add them under their proper semester.

[+ Add A Course](#) [+ Add A Semester](#)

Standardized Tests

Please provide information about the tests you have taken or plan to take. You may add or update this information at any time prior to submission. Once you have submitted, you will be able to add additional tests as well as update the ones marked "plan to take", but you will not be able to update or delete completed tests.

GRE	<input type="checkbox"/>
IELTS	<input type="checkbox"/>
MCAT	<input type="checkbox"/>
TOEFL	<input type="checkbox"/>

[+ Add a Standardized Test](#)

Add Your Tests



Please provide information about the tests you have taken or plan to take. You may add or update this information at any time prior to submission. Once you have submitted, you will be able to add additional tests as well as update the ones marked "plan to take", but you will not be able to update or delete completed tests.

* Indicates required field.

* What type of test do you want to add?

GRE

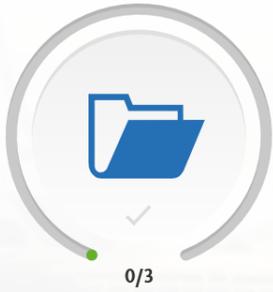
* Have you taken the test?

Yes No

* When do you plan to take this test?

MM/DD/YYYY

ETS Registration Code



Supporting Information

0/3 Sections Completed



Evaluations

Experiences

Achievements

Evaluations

You must have a minimum of **3 requested evaluations** in order to submit your application. You may enter a maximum of 6.

Once you have saved an electronic evaluation, an email request will automatically be sent to the evaluator on your behalf. Please advise your evaluator to look for this email in their inbox, as well as their spam or junk-mail folder, as emails do occasionally get filtered out.

Evaluation 1

[+ Create Evaluation Request](#)

Evaluation 2

[+ Create Evaluation Request](#)

Evaluation 3

[+ Create Evaluation Request](#)

Create Evaluation Request

[+ Create Evaluation Request](#)

Evaluator's Information

* First Name

* Last Name

* Email Address

* Due Date  MM/DD/YYYY

* Personal Message to Your Evaluator

0/500

Waiver of Evaluation

* I waive my right of access to this evaluation. Yes No

*** Permission to Contact Reference**

I hereby give permission to contact this reference via email to request the completion of the reference form and letter of reference. If my reference does not submit an online reference form in response to the email request, it is my sole responsibility to contact the reference directly to ensure all references required by my designated schools are received by the deadline.

*** Permission for Schools to Contact Reference**

I understand that the schools to which I am applying may contact the reference either to verify the information provided and/or for further clarification of the information provided, and I hereby give permission for the schools to do so.

Experiences

You may update the information in this section at any time prior to submission. Once you have submitted, you will be able to add more Experiences, but you will not be able to update or delete completed Experiences. Please refer to the Checklist on the program materials section of the application to determine if this section is required for your program application.

Experiences are an important part of the VMCAS application. There are four main categories of experiences: Animal, Veterinary, Research, Employment; and two other categories: Extracurricular Activities and Volunteer. To help you select the correct category for the main experiences types, please refer to the experience chart found here:

http://aavmc.org/data/images/vmcas/experiences_chart.png

 **Add an Experience**

I Am Not Adding Any Experiences

Add Your Experiences



Update your experiences any time prior to submission. After submission, you can add more experiences. However, you cannot update or delete completed experiences. Refer to the Checklist on the program materials section of the application to determine if experiences are required for your program application.

* Indicates required field.

Experience Type

* What type of experience do you want to add?

Organization

* Name

Address

Address 2

City

* Country

Zip Code

* State

Supervisor

First Name

Last Name

Title

Contact Phone

Contact Email

Experience Dates

* Start Date  MM/DD/YYYY

* Current Experience Yes No

* End Date  MM/DD/YYYY

* Status 

Experience Details

* Title

* Type of Recognition

Compensated

Received Academic Credit

Volunteer

* Average Weekly Hours x

* Number of Weeks =

* Total Hours

* Description/Key Responsibilities

* Release Authorization (May we contact this organization?) Yes No

0/600

Achievements

You may update the information in this section at any time prior to submission. Once you have submitted, you will be able to add more Achievements, but you will not be able to update or delete completed Achievements. Please refer to the Checklist on the program materials section of the application to determine if this section is required for your program application.

 **Add an Achievement**

[I Am Not Adding Any Achievements](#)

Add Your Achievements

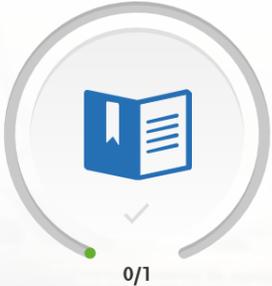
Update your achievements any time prior to submission. After submission, you can add more achievements. However, you cannot update or delete completed achievements. Refer to the Checklist on the program materials section of the application to determine if achievements are required for your program application.

* Indicates required field.

Achievement Details

* Type	<input type="text" value="Select Achievement Type"/>
* Name	<input type="text"/>
Name of Presenting Organization	<input type="text"/>
Issued Date	<input type="text" value="MM/DD/YYYY"/>
Brief description	<input type="text"/>

0/600



Program Materials

0/1 Sections Completed

Test_program
Lincoln Memorial University

Lincoln Memorial University

Test_program

Deadline: 09/29/2018

[Home](#)

[Prerequisites](#)

[Questions](#)

Thank you for applying to the Lincoln Memorial University-College of Veterinary Medicine! We look forward to working through the application process with you.

Minimum Requirements: At least a 2.8 overall GPA and [pre-requisites](#) completed with a C or higher

Letters of Recommendation submitted through VMCAS:

- 1 letter from a professor
- 1 letter from a veterinarian
- 1 letter from an employer (current or previous, can also be a veterinarian)

Additional Required Application Materials:

- Official GRE Scores submitted through VMCAS (LMU VMCAS GRE School Code: 7576)
- [LMU Supplemental Application](#)

Deadline: All application materials must be received by September 15, 2017.

Want to learn more about our admissions process? Visit us at [LMU-CVM Admissions](#)

If you have any questions at any time during your application process, please do not hesitate to contact us. You can reach us by email: veterinaryadmissions@LMU.net or by phone to 423-869-6078.

Program Details

Program Name: Test_program	Level: DVM	Start Term: Fall
Start Year: 2019	City: Harrogate	State: TN
Deadline: September 29, 2018		

[Home](#)[Prerequisites](#)[Questions](#)

Prerequisites

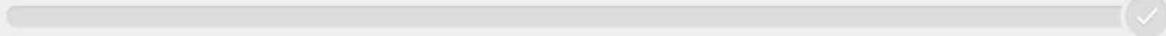
You must complete your Transcript Entry in the Academic History section before you can identify prerequisites.

The pre-requisites for the LMU-CVM must meet the following criteria:

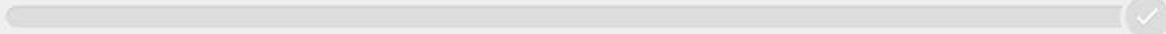
- A grade of “C-” or above is required for each prerequisite course.
- Coursework to satisfy all science prerequisites must have been completed within the last 10 years. Courses taken prior to Fall 2007 will not fulfill science pre-requisites. The science prerequisites would include: Biology, Genetics, Biochemistry, Advanced Science Electives, Organic Chemistry, General Chemistry and Physics.
- Pre-requisite courses can be “in progress” or “planned” at the time you submit your application, however official transcripts reflecting successful completion of those pre-requisites must be submitted to LMU by the end of the Spring semester/quarter 2018.
- A course can only fulfill one pre-requisite.
- Repeated courses will only be counted once towards fulfilling a pre-requisite
- AP credit policy: AP courses used for pre-requisites must appear on official college transcripts and be equivalent to the appropriate college-level coursework. AP test subject and number of credits must also be specified on the transcript.
- Courses must be completed at a recognized regionally accredited college or university.
- Advanced science courses include science courses at the 300 level or higher including but not limited to Anatomy, Cell Biology, Immunology, Microbiology, Molecular Biology, Physiology, and Virology.

For more information about the pre-requisites and application process please visit our website: <http://vetmed.lmunet.edu/admissions/>.

Advanced Science Electives

[+ Assign Course](#)

Social Sciences

[+ Assign Course](#)

Prerequisites

Advanced Science Electives  

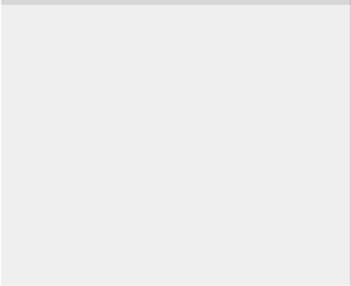
Select Your Advanced Science Electives Course

I Am Not Matching Any Courses to this Prerequisite

Lecture Course listing 300 or higher * Examples include Anatomy, Cell Biology, Immunology, Microbiology, Molecular Biology, Physiology, and Virology

Minimum Credits 8 | Minimum Grades 2

HARVARD UNIVERSITY
Transcript 



Winter 2022					
	COURSE CODE	COURSE TITLE	SUBJECT	CREDITS	GRADE
	Math101	Intro to Math	Mathematics	3.00	A

Home

Prerequisites

Questions

Questions

Please answer the following questions.

* Indicates required field.

Demographics

* Is your hometown located in the Appalachia Region as defined by the ARC (<http://www.arc.gov/counties>)?

Yes

No

* Describe the population of your hometown:

Less than 2,500

2,500 to 4,999

5,000 to 9,999

10,000 to 24,999

25,000 to 49,999

50,000+

* Did you grow up on a farm?