

## VMCAS 2007

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### *Identification* (<https://www.vmcas.org/vmcas/html/notavailable.htm>)

VMCAS ID: **Calculated when application is created**

Last Name: **Mandatory**

First Name: **Mandatory**

Middle Name: **Optional**

Suffix: **Optional**

Email: **Mandatory**

### *Address Information* ([https://www.vmcas.org/vmcas/html/INS\\_bio.HTM](https://www.vmcas.org/vmcas/html/INS_bio.HTM))

Any other name on previous academic records:

Last Name: **Optional**

First Name: **Optional**

Middle Name: **Optional**

Current Address

Since Month: **Mandatory**

Year: **Mandatory**

Street (1): **Mandatory**

Street (2): **Optional**

City: **Mandatory**

State: **Mandatory**

Zip Code (enter 99999 For International Addresses): **Mandatory**

Current Until Month: **Mandatory**

Year: **Mandatory**

County or Parish: **Optional**

Country (if not USA): **Optional**

Other Country (Only if country is not on list provided, leave blank otherwise): **Optional**

Day Telephone: **Mandatory**

Evening Telephone: **Mandatory**

Permanent Address

(If you change any information in the current address section, please uncheck and then recheck this box.)

Check if Permanent Address is the same as the Current Address: **Mandatory**

Since Month: **Mandatory**

Year: **Mandatory**

Street (1): **Mandatory**

Street (2): **Optional**

City: **Mandatory**

State: **Mandatory**

Zip Code (enter 99999 For International Addresses): **Mandatory**

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County or Parish: **Optional**

Country (if not USA): **Optional**

Other Country (Only if country is not on list provided, leave blank otherwise): **Optional**

Day Telephone: **Mandatory**

Evening Telephone: **Mandatory**

Cell Phone: **Optional**

Preferred Method of Contact: **Mandatory**

*Personal Data* ([https://www.vmcas.org/vmcas/html/INS\\_personal.HTM](https://www.vmcas.org/vmcas/html/INS_personal.HTM))

Date Of Birth: **Optional**

Age Today: **Optional**

Gender: **Optional**

SSN (ex:99999999): **Optional**

Ethnicity (Optional)

Please select only one of the following check boxes.

Spanish / Hispanic / Latino ethnicity: **Optional**

No Spanish / Hispanic / Latino ethnicity: **Optional**

Spanish / Hispanic / Latino Ethnicity (Optional)

Mexican / Mexican American / Chicano: **Optional**

Puerto Rican: **Optional**

Cuban: **Optional**

Other Spanish / Hispanic / Latino American: **Optional**

Race (Optional)

White/Caucasian (Including Middle Eastern): **Optional**

African American / Black: **Optional**

American Indian / Alaskan Native: **Optional**

Please specify tribal affiliation: **Optional**

Filipino / Filipino American: **Optional**

Chinese /Chinese American: **Optional**

East Indian: **Optional**

Japanese / Japanese American: **Optional**

Korean / Korean American: **Optional**

Pacific Islander: **Optional**

Other Asian: **Optional**

Please Specify: **Optional**

Other: **Optional**

Please Specify: **Optional**

City of Birth: **Mandatory**

State of Birth: **Mandatory**

County or Parish of Birth: **Optional**

Country of Birth: **Optional**

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Other Country of Birth (Only if country is not on list provided, leave blank otherwise):

**Optional**

Are you a U.S. Citizen?: **Mandatory**

Are you a Canadian Citizen?: **Mandatory**

Country of Citizenship: **Optional**

Other Country of Citizenship (Only if country is not on list provided, leave blank otherwise): **Optional**

State of Legal Residence: **Mandatory**

Number of years you have lived in this state?: **Mandatory**

Number of months?: **Mandatory**

When Did Your Residency In This State Begin?: **Mandatory**

Are you a veteran of U.S. Military Service?: **Optional**

If YES, enter Branch: **Optional**

Length of Service?

From Month: **Optional**

Year: **Optional**

To Month: **Optional**

Year: **Optional**

What type of discharge/separation did you receive?: **Optional**

If you are not a U.S. Citizen, what is your status?: **Optional**

What is your alien registration number?: **Optional**

City where VISA issued?: **Optional**

State?: **Optional**

When Was It Issued?: **Optional**

If you are a non-immigrant, what is your VISA type?

Indicate VISA type held, applied for, or planned.: **Optional**

### *Parent/Legal Guardian Information*

([https://www.vmcas.org/vmcas/html/INS\\_prnt.HTM](https://www.vmcas.org/vmcas/html/INS_prnt.HTM))

Father's

Is Father/Guardian Living?: **Mandatory**

Last Name: **Mandatory if "Father is Living"**

First Name: **Mandatory if "Father is Living"**

Middle Initial: **Optional**

City: **Mandatory if "Father is Living"**

State: **Mandatory if "Father is Living"**

Zip Code (enter 99999 For International Addresses): **Mandatory if "Father is Living"**

County or Parish: **Optional**

Country (if not USA): **Mandatory if "Father is Living"**

Telephone: **Mandatory if "Father is Living"**

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State of Legal Residence: **Mandatory if "Father is Living"**  
Since: **Mandatory if "Father is Living"**  
Mother's  
Is Mother/Guardian Living?: **Mandatory**  
Last Name: **Mandatory if "Mother is Living"**  
First Name: **Mandatory if "Mother is Living"**  
Middle Initial: **Optional**  
City: **Mandatory if "Mother is Living"**  
State: **Mandatory if "Mother is Living"**  
Zip Code (enter 99999 For International Addresses): **Mandatory if "Mother is Living"**  
County or Parish: **Optional**  
Country (if not USA): **Mandatory if "Mother is Living"**  
Telephone: **Mandatory if "Mother is Living"**  
State of Legal Residence: **Mandatory if "Mother is Living"**  
Since: **Mandatory if "Mother is Living"**

**High School Information** ([https://www.vmcas.org/vmcas/html/INS\\_highscl.HTM](https://www.vmcas.org/vmcas/html/INS_highscl.HTM))

Did you graduate from high school?: **Mandatory**  
Year Of Graduation: **Mandatory if "Did you graduate from high school?" is YES.**  
High School Name: **Mandatory if "Did you graduate from high school?" is YES.**  
City: **Mandatory if "Did you graduate from high school?" is YES.**  
State: **Mandatory if "Did you graduate from high school?" is YES.**  
If No, did you complete the GED?: **Mandatory if "Did you graduate from high school?" is NO., Blank if "Did you graduate from high school?" is YES.**

**Institution List** ([https://www.vmcas.org/vmcas/html/INS\\_schools.HTM](https://www.vmcas.org/vmcas/html/INS_schools.HTM))

I attended, am attending, or plan to attend the following college(s): <b>This table requires at least one record. Mandatory refers to the requirements within each record built by the applicant.</b>	
<b>Code</b>	<b>Name &amp; Location</b>
<b>Mandatory</b>	<b>Description</b>

**Degree Information** ([https://www.vmcas.org/vmcas/html/INS\\_univ.HTM](https://www.vmcas.org/vmcas/html/INS_univ.HTM))

**This table requires at least one record. Mandatory/Optional refers to the requirements within each record built by the applicant.**

School Name: **Mandatory**  
Received or Expected Degree: **Mandatory**  
Primary?: **Mandatory**

Fall 2006?: **Optional**  
Dates of Attendance  
From Month: **Mandatory**  
Year: **Mandatory**  
To Month: **Mandatory**  
Year: **Mandatory**  
Major: **Mandatory**  
Date of Degree Granted/Expected  
Month: **Optional**  
Year: **Optional**

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***Previous Professional or Graduate Enrollments***

([https://www.vmcas.org/vmcas/html/INS\\_previous.HTM](https://www.vmcas.org/vmcas/html/INS_previous.HTM))

**This table is optional. Mandatory/Optional refers to the requirements within each record built by the applicant.**

List all professional/graduate schools (including those in the previous section) to which you were admitted or in which you enrolled and enter month and year for all actions that apply.

College Code: **Mandatory**  
Degree Granted or Expected: **Mandatory**  
Major: **Mandatory**  
Admitted  
Month: **Optional**  
Year: **Optional**  
Declined Admission  
Month: **Optional**  
Year: **Optional**  
Deferred Admission  
Month: **Optional**  
Year: **Optional**  
Enrolled  
Month: **Optional**  
Year: **Optional**  
Withdrew  
Month: **Optional**  
Year: **Optional**  
Leave of Absence  
Month: **Optional**  
Year: **Optional**  
Suspended/Dismissed

Month: **Optional**  
Year: **Optional**  
Completed Program  
Month: **Optional**  
Year: **Optional**

**Official Tests** ([https://www.vmcas.org/vmcas/html/INS\\_tests.HTM](https://www.vmcas.org/vmcas/html/INS_tests.HTM))

Indicate each of the test(s) you have taken and/or plan to take and beginning with the most recent corresponding dates. Be certain to have your official score(s) released to your designated schools.

Gre General (1): **Optional**  
Gre General (2): **Optional**

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Gre General (3): **Optional**  
Gre General (4): **Optional**  
Gre Subject (1): **Optional**  
Specify GRE Subject: **Optional**  
Gre Subject (2): **Optional**  
Specify GRE Subject: **Optional**  
Mcat: **Optional**  
Vcat: **Optional**  
Toefl: **Optional**  
Other (Specify): **Optional**  
Other (1) Value: **Optional**  
Other (Specify): **Optional**  
Other (2) Value: **Optional**  
Other (Specify): **Optional**  
Other (3) Value: **Optional**

**Veterinary Experience** ([https://www.vmcas.org/vmcas/html/INS\\_veterinary.HTM](https://www.vmcas.org/vmcas/html/INS_veterinary.HTM))

**This table is optional. Mandatory/Optional refers to the requirements within each record built by the applicant.**

Name of Veterinarian / Scientist and/or Clinic or Hospital: **Mandatory**  
City: **Mandatory**  
State: **Mandatory**  
Description of Duties: **Mandatory (Maximum length of 480 characters)**  
Dates  
From Month: **Mandatory**  
Year: **Mandatory**  
To Month: **Mandatory if "To Year" is not blank. If both "To Month" and "To Year" are blank, this indicates that the experience is ongoing.**

Year: **Mandatory if "To Month" is not blank. If both "To Month" and "To Year" are blank, this indicates that the experience is ongoing.**

Average Number of Hours/Week: **Optional**

Total Number of Hours over Span of Experience: **Mandatory**

Animal Types

Small: **Optional**

Food Animal: **Optional**

Equine: **Optional**

Mixed Animal: **Optional**

Research: **Optional**

Zoo Animal/Wildlife: **Optional**

Exotic/Avian: **Optional**

Other: **Optional**

Specify if Other: **Optional**

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*Animal Experience* ([https://www.vmcas.org/vmcas/html/INS\\_animals.HTM](https://www.vmcas.org/vmcas/html/INS_animals.HTM))

**This table is optional. Mandatory/Optional refers to the requirements within each record built by the applicant.**

Type of Experience: **Mandatory**

City: **Mandatory**

State: **Mandatory**

Description of Duties: **Mandatory (Maximum length of 480 characters)**

Dates

From Month: **Mandatory**

Year: **Mandatory**

To Month: **Mandatory if "To Year" is not blank. If both "To Month" and "To Year" are blank, this indicates that the experience is ongoing.**

Year: **Mandatory if "To Month" is not blank. If both "To Month" and "To Year" are blank, this**

**indicates that the experience is ongoing.**

Average Number of Hours/Week: **Optional**

Total Number of Hours over Span of Experience: **Mandatory**

Animal Types

Small: **Optional**

Food Animal: **Optional**

Equine: **Optional**

Mixed Animal: **Optional**

Research: **Optional**

Zoo Animal/Wildlife: **Optional**

Exotic/Avian: **Optional**

Other: **Optional**

Specify if Other: **Optional**

*Employment Experience* ([https://www.vmcas.org/vmcas/html/INS\\_employ.HTM](https://www.vmcas.org/vmcas/html/INS_employ.HTM))

**This table is optional. Mandatory/Optional refers to the requirements within each record built by the applicant.**

Include paid employment only, since high school, and start with your most recent job. Do not include any experience listed in Veterinary and Animal Experience.

Name of Company: **Mandatory**

City: **Mandatory**

State: **Mandatory**

Description of Duties: **Mandatory (Maximum length of 480 characters)**

Dates

From Month: **Mandatory**

Year: **Mandatory**

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To Month: **Mandatory if "To Year" is not blank. If both "To Month" and "To Year" are blank, this indicates that the experience is ongoing.**

Year: **Mandatory if "To Month" is not blank. If both "To Month" and "To Year" are blank, this indicates that the experience is ongoing.**

Average Number of Hours/Week: **Optional**

Total Number of Hours over Span of Experience: **Mandatory**

***Honors and Awards*** ([https://www.vmcas.org/vmcas/html/INS\\_honors.HTM](https://www.vmcas.org/vmcas/html/INS_honors.HTM))

Name of Award: **Mandatory**

Brief Description: **Mandatory**

Month: **Mandatory**

Year: **Mandatory**

***Extracurricular and Community Activities***

([https://www.vmcas.org/vmcas/html/INS\\_commun.HTM](https://www.vmcas.org/vmcas/html/INS_commun.HTM))

Extracurricular and Community Activities: **Mandatory**

Brief Description: **Mandatory**

From Month: **Mandatory**

Year: **Mandatory**

To Month: **Mandatory**

Year: **Mandatory**

***Background Information*** ([https://www.vmcas.org/vmcas/html/INS\\_other.HTM](https://www.vmcas.org/vmcas/html/INS_other.HTM))

Current Student Status?: **Mandatory**

Student Reported GPA (Example 3.99): **Mandatory**

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

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

**Mandatory if YES,  
Optional if NO.**

Were you ever the recipient of any action (e.g. dismissal, disqualification, suspension, etc.) by any college or university for unacceptable academic performance or conduct violations?: **Mandatory**

If yes, provide a full explanation.: **Mandatory if YES, Optional if NO.**

Have you ever pled nolo contendere (no contest) or been convicted of either a felony or a misdemeanor, other than a minor traffic violation?: **Mandatory**

If yes, provide a full explanation.: **Mandatory if YES, Optional if NO.**

Are you a "WICHE" applicant? (See Instructions): **Mandatory**

The personal statement should help admission committee(s) learn something personal about the applicant, about his

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or her interest in veterinary medicine, and about career goals.

Personal Statement: **Mandatory**

Explanation Statement: **Optional**

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 all application Help Text, 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 the notices contained with 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 a college after I have been admitted.

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

Certification / Authorization: **Mandatory**

### ***Academic Course Work*** ([https://www.vmcas.org/vmcas/html/INS\\_sess\\_ac.HTM](https://www.vmcas.org/vmcas/html/INS_sess_ac.HTM))

**This table requires at least one record. Mandatory/Optional refers to the requirements within each record built by the applicant.**

College Year Term Note S, Q or

T Course

Title Prefix and

Number Status Transcript

Grade Credits/Hours/Units VMCAS Pre-Req

Code

**Mandatory Mandatory Mandatory Mandatory Mandatory Mandatory Mandatory Mandatory Mandatory Mandatory**

### ***Planned Prerequisite Courses*** ([https://www.vmcas.org/vmcas/html/INS\\_sess\\_pl.HTM](https://www.vmcas.org/vmcas/html/INS_sess_pl.HTM))

This table is optional. Mandatory/Optional refers to the requirements within each record built by the applicant.  
College Year Term Note S, Q or T Course Title Prefix and Number Credits/Hours/Units VMCAS Pre-Req Code  
Mandatory Mandatory Mandatory Mandatory Mandatory Mandatory Mandatory

**College Designation** ([https://www.vmcas.org/vmcas/html/INS\\_designate.HTM](https://www.vmcas.org/vmcas/html/INS_designate.HTM))

My College Designations

This table requires at least one record. Mandatory refers to the requirements within each record built by the applicant.

Code College

Mandatory Description

**Other/Previous Applications** ([https://www.vmcas.org/vmcas/html/INS\\_applied.HTM](https://www.vmcas.org/vmcas/html/INS_applied.HTM))

If you are currently applying to veterinary medical colleges other than the one(s) you designated in the previous section, enter their codes here:

Other Current Application A: **Optional**

Other Current Application B: **Optional**

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Other Current Application C: **Optional**

Other Current Application D: **Optional**

Other Current Application E: **Optional**

Other Current Application F: **Optional**

Other Current Application G: **Optional**

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

Year: **Optional**

Year: **Optional**

Year: **Optional**

Year: **Optional**

Year: **Optional**