

TRANSCRIPT REQUEST FORM

TO THE APPLICANT: Complete this form and submit a copy to each institution you attended. If you need more than three request forms, please feel free to photocopy this sheet. Upon receipt of the official transcripts in a sealed envelope from the registrar, send directly to the designated VMCAS colleges. You are not required to use this form to request transcripts.

Full Legal name: Name on Transcript: Social Security #: Date of Birth: Name of Institution: From: to: Currently enrolled: YES NO Degree Received: Signature:

TO THE REGISTRAR: Transcripts must be sent in a sealed institutional envelope and display the seal of the Registrar. The transcript(s) may be marked "Issued to Student." The student will forward the sealed transcript(s) and other application materials to the selected Veterinary Medical College Application Service (VMCAS) colleges. Please contact VMCAS at (202) 682-0750, 1(877) 862-2740 - Student/Advisor Hotline or vmcas@aavmc.org for additional information.



Mail Transcripts to:

Address: City: State: Zip Code: Country, (if other than U.S.):

Registrars who cannot release such transcripts to students may send them directly to the VMCAS colleges.

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