VMCAS 2025 SAMPLE APPLICATION

Important dates:
- VMCAS Application Opens: January 23, 2024
- VMCAS Application Deadline: September 16, 2024

Welcome to VMCAS

The American Association of Veterinary Medical Colleges (AAVMC) coordinates the national and international affairs of all thirty-three veterinary medical colleges in the United States and five in Canada, three departments of veterinary science, three departments of comparative medicine, and seventeen international colleges of veterinary medicine. The AAVMC sponsors the Veterinary Medical College Application Service (VMCAS), which provides application services for thirty-one US veterinary medical colleges, two Canadian, and eleven international colleges of veterinary medicine.

The AAVMC's mission is to inspire innovation and promote excellence in academic veterinary medicine worldwide.

For questions about the VMCAS application, refer to the VMCAS Applicant Help Center.

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

👤 Username

🔑 Password

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.

Your Legal Name

Title

* Legal First Name

Middle Name

* Last or Family Name

Suffix (Jr., Sr., III, etc.)

Contact Information

* Email Address

| | Home ⌄ |

* Confirm Email Address

* Preferred Phone Number

| ▩ ▾ (201) 555-0123 | Mobile ⌄ |

Alternate Phone Number

| ▩ ▾ (201) 555-0123 | Mobile ⌄ |

Text and Phone Authorization

☐ I agree to the Terms of Service and to receive calls and/or texts at any phone number I have provided or may provide in the future, including any wireless number, from any entity associated with my application process, including but not limited to my designated schools and programs, the Liaison International support team, or the association for this Centralized Application Service.

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

* Password

Your password must meet these minimal requirements:

Password cannot contain username.

Minimum of 8 Characters

1 lowercase letter

1 uppercase letter

1 number

1 special character

* Confirm Password

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

European Union Data Protection

* Are you currently located in a European Union country, Iceland, Lichtenstein, Norway, or Switzerland?

◯ Yes   ◯ No

My Extended Profile

Please provide some additional information in order to set up your application.

* Indicates required field

Intended Term of Enrollment

* Please let us know when you plan to begin your program to help us serve you better.

[dropdown ⌄]

Current Academic Status

* Please select your current academic level.

[dropdown ⌄]

Save Changes

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

⟳ Welcome back to the VMCAS application (save this email!)   Today

View My Notifications

ⓘ Heads up! The VMCAS deadline is September 16 at 11:59 PM ET.

Personal Information

0/7
Sections Completed

Academic History

0/4
Sections Completed

Supporting Information

0/5
Sections Completed

Program Materials

You have not selected any programs to apply to. Add a program to start this section and complete your application.

Add A Program

Add Programs

Programs will be available starting May 9. Visit VMSAR for program-specific information and admissions requirements.

Find Program | **View Selected Programs**

Search for a Program or Organization 🔍 | ▼ Filters

Showing results for: ✕ Available Programs

Add	Program Name	Level	Start Term	Start Year	City

Skip for Now

Submit Application

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.

⚠ **Please note:** Programs will be available for submissions starting May 9, 2024.

APPLICATIONS READY FOR SUBMISSION	TOTAL FEE(S)
0	**$0.00**

Sort By Deadline ▼

You have not selected any programs. Add a program to start this section and complete your application.

Add a Program

Personal Information

0/7 Sections Completed

0/7

Release Statement

Biographic Information

Contact Information

Citizenship Information

Race & Ethnicity

Parent/Guardian

Other Information

Release Statement

You must review and respond to the following release statements to submit your application. Once you submit your application, your responses cannot be edited. Review these instructions and the content of the statements carefully. It's your responsibility to read and understand these statements before responding to them. Visit the Applicant Help Center for more information.

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. You must follow these guidelines:

1. Review the admissions requirements and application procedures for VMCAS and 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 application 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 log in to the VMCAS application to check for important messages under Notifications and your current status in the Check Status tab.
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 that 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 Release and Certification Statements

* I acknowledge that content requested in the Program Materials section of VMCAS is included by the individual veterinary college or school and is not reviewed or approved by AAVMC or its technology partner, Liaison International. As such, neither AAVMC nor Liaison International are responsible for, and assume no liability for the compliance of the requested content with state or federal law. In connection with any litigation between or including the parties hereto arising under, out of, or relating to the application, I irrevocably consent to the exclusive jurisdiction and venue in District of Columbia Superior Court or United States District Court for the District of Columbia.

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, and all actions by a university or other institution. I have read and understand all notices contained within the application and the VMCAS Applicant Help Center 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.

I authorize the AAVMC VMCAS to disclose my information to (a) a limited number of third-party organizations that are involved in the application process, including AAVMC VMCAS's third-party service providers, and (b) tuition assistance services that request this information, such as those that use information to identify and contact applicants who may be eligible for waivers or scholarships.

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

* I give my permission for 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.

* I certify that the content of my application is my own original work and is an accurate representation of my experience(s). I have not used any AI essay generators (e.g., ChatGPT) or resources to generate the content. I certify that I have not had assistance from other individuals beyond providing feedback on the content of my application.

☐   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](#).

I understand that:

- I must record and provide my VMCAS ID whenever contacting VMCAS for questions or concerns.
- I must request at least three recommenders in the Recommendations section.
- VMCAS only accepts electronic recommendations. I understand that it is my responsibility to check with school sites to verify recommendation requirements.
- My recommenders must submit my recommendation letters and evaluation criteria ratings through Letters by Liaison (Recommendation Portal).
- I must verify that my recommenders' emails are correct and that they have received the email request once I have created them in the system.
- My recommenders must submit their electronic recommendations by the application deadline.
- I must send official transcripts of all coursework taken prior to Fall 2024 directly to VMCAS by the application deadline of September 16, 2024.
- [Foreign coursework](#) requires a World Education Service (WES) [course-by-course evaluation](#). It is my responsibility to request the WES evaluation to be sent to VMCAS by the application deadline.
- If I elect to participate in and pay for the Professional Transcript Entry (PTE) service, I must do so by August 9, 2024.
  - I agree to adhere to the PTE timeline and instructions for submitting at least one application for PTE to begin, sending all my required transcripts, and approving my PTE.
  - I agree to enter any coursework that is ineligible for PTE prior to opting-in and paying for Professional Transcript Entry (PTE) service. Ineligible coursework includes planned or in-progress courses and courses taken at unlisted US schools.
  - I understand if I do not enter planned or in-progress coursework, it will not be eligible for matching to school prerequisites.
- I must send GRE scores (if applicable) to the appropriate GRE code, as described in the VMCAS instructions.
- I must complete supplemental applications and send supplemental fees (if applicable) and final Fall 2024 & Spring 2025 transcripts directly to my designated colleges.
- 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.
- By sending payment to VMCAS, I am signaling my intent for VMCAS to process my materials, regardless if they are completed.
- VMCAS does not provide refunds under any circumstances. This includes accidentally choosing the wrong school, missing the deadline, or materials are not received by the deadline.

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

Advisor Release

* By selecting **Yes**, you authorize VMCAS to release parts of your VMCAS application and application status to pre-health advisors and advisory committees at schools you previously attended. Your advisor can then better assist you throughout the admissions process. Your academic and application status information is shared; however, your personal, financial, and disciplinary information, as well as your personal statement, are not shared. Once you submit your application, you cannot edit this response.

◯ Yes   ◯ No

Applicant Data

* I give my permission to AAVMC to utilize raw applicant data for research purposes.

◯ Yes, I understand and accept the terms described above.   ◯ No, I do not accept the terms described above.

Biographic Information

Enter biographic information in this section. Some fields pull in the information entered when you created your account. Confirm that what appears here is correct; click the **My Profile** link to make changes. If you do not identify with the answer options for legal sex, select **Decline to State**. Visit the [Applicant Help Center](#) for more information.

You can edit this section after you submit your application.

Legal Sex

* What is your legal sex?

(●) Female   ( ) Male   ( ) X   ( ) Decline to State

Gender Identity

How do you describe your current gender identity?   [⌄]

Pronouns

* Please select the set of pronouns you prefer others use when referring to you.   [⌄]

Your Legal Name

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

Legal First Name | Diana |

Middle Name | |

Last or Family Name | Gonzales |

Suffix (Jr., Sr., III, etc.) | |

Former Name

* Do you have any materials under a former legal name?

( ) Yes   (●) No

Birth Information

* Date of Birth   [_____ 📅] MM/DD/YYYY

* Country of Birth   [Select Country ▼]

* City of Birth   [_____]

* State/Province of Birth   [Select State/Province ▼]

* County of Birth   [Select County ▼]

Legal/Preferred Name Phonetic Pronunciation

Enter the phonetic pronunciation of your first and last name or write a familiar word that rhymes with your name. Phonetic pronunciation is how your names sound when read or spoken aloud. Make sure to separate syllables with dashes and capitalize syllables that are stressed. Refer to the Phonetic Spelling Guide for more information.

Examples:
• Raul Gonzalez = rah-OOL gon-SAH-les
• Ngoc Nguyen = nahk nuhWEN or sounds like "knock" "WIN"
• Sophia Lamagna = so-FEE-uh sounds like "lasagna"

Please provide the phonetic pronunciation of your first and last name.

[   ]

0 word   0/300

(✓) Save and Continue

Contact Information

Enter your contact information in this section. Keep this information up-to-date throughout the application process. Visit the Applicant Help Center for more information.

You can edit this section after you submit your application.

Current Address

* Country / Territory	Select a Country ⌄
* Street Address 1	
Street Address 2	
* City	
* State/Province	Select a State/Province ⌄
* County	Select a County ⌄
* Zip/Postal Code	
Approximate Date through which current address is valid	📅 MM/DD/YYYY

* Is this your permanent address?

○ Yes   ● No

What is your permanent address?

* Country / Territory	Select a Country ⌄
* Street Address 1	
Street Address 2	
* City	
* State/Province	Select a State/Province ⌄
* County	Select a County ⌄
* Zip/Postal Code	

Phone

To make changes to your phone number, go to the Profile Section

* Preferred Phone Number

| +12023719195 | Mobile ⌄ |

Alternate Phone Number

| | Type ⌄ |

Email

To make changes to your email, go to the Profile Section

* Email

| vmcastestDD@mailinator.com | Home ⌄ |

Alternate Email

If you only have one email address, please retype it here.

* Alternate Email Address

| |

⊘ Save and Continue

Citizenship Information

Enter your citizenship information in this section. Visit the [Applicant Help Center](#) for more information.

If you are not a US citizen, you can edit this section after you submit your application.

United States Citizenship Details

* U.S. Citizenship Status

Select Citizenship ⌄

* Country of Citizenship

Select Country of Citizenship ⌄

* Do you have dual citizenship?

○ Yes   ○ No

Residency Information

* Legal State of Residence

Select State/Province ⌄

* Legal County of Residence

Select County ⌄

* How long have you been a resident of your state?

Select Residency Duration ⌄

* How long have you lived in the U.S.?

Select Duration ⌄

Visa Information

* Do you have a U.S. Visa?

○ Yes   ● No

✓ Save and Continue

Race & Ethnicity

Select any and all of the options in this section which you feel best apply to you. Note that this section is used for statistical purposes only and in no way affects your application or financial aid eligibility. Visit the Applicant Help Center for more information.

Once you submit your application, you cannot edit this section.

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

[✓ **Save and Continue**]

Parent/Guardian

Enter demographic information about your parent(s) or guardian(s). This information is only used for data and recruitment purposes. Visit the Applicant Help Center for more information.

Once you submit your application, you cannot edit this section.

[⊕ **Add a Parent/Guardian**]

[I Am Not Adding Any Parent/Guardian]

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. ✕

Parent Info

* Relationship to Applicant   Select Relationship ⌄

* First Name   [   ]

* Last Name   [   ]

Gender

○ Male   ○ Female   ○ Decline to State

* Living?

○ Yes   ○ No   ○ Don't Know

Occupation

Occupation   Select Occupation ⌄

Parent Residency

Country of Legal Residence

○ United States   ○ Canada   ○ Other

State/Province   Select State/Province ⌄

County   Select County ⌄

Parent Education

Highest Education Level   Select Education ⌄

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.

✓ Save and Continue

Other Information

Enter your responses to these additional questions. Visit the [Applicant Help Center](#) for more information.

Once you submit your application, you can update Infractions only if you submitted your application with an answer of **No.**

Language Proficiency

* What is your First Language?

Select Language ⌄

⊕ **Add Another Language**

Military Status

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

Select Military Status ⌄

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

Additional Information

Your primary college or university is the college or university where you will earn (or have earned) your first bachelor's degree.

* Student Reported GPA from Primary School

Education Interrupted

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

◯ Yes   ◯ No

WICHE Applicants

You are a WICHE (Western Interstate Commission for Higher Education) applicant if you are a resident of Arizona, CNMI, Hawaii, Montana, New Mexico, North Dakota, or Wyoming AND if you have applied for and/or received notice from the certifying office in your state/territory that you are a duly certified applicant for the Professional Student Exchange Program. For more information, contact your [WICHE State Certifying Office](#). You can also visit the [WICHE website](#) for more information about how WICHE PSEP applicants are selected for support in veterinary medicine.

* Are you a 'WICHE' applicant?

◯ Yes   ◯ No

Previous Applications

Have you previously applied to one or more colleges of veterinary medicine through VMCAS?

◯ Yes   ◯ No

Previous Attendance at a Professional Program

* Have you ever enrolled in or attended a veterinary school, medical school, law school, or other professional degree program? Include enrollment in any post-baccalaureate veterinary preparatory program with the intent to earn a professional degree.

◯ Yes   ◯ No

Personal Pet Experience

Which of the following have you had as a personal pet? (Check all that apply)

☐ Aquatic

☐ Bovine

☐ Camelid

☐ Canine

☐ Cervids

☐ Equine

☐ Feline

☐ Honey bees

☐ Non-poultry birds

☐ Pocket pets

☐ Poultry

☐ Reptiles, non-aquatic

☐ Small ruminants

☐ Swine

HOSA Participation

Did you participate in HOSA Future Health Professionals (formerly known as Health Occupations Students of America) during high school?

◯ Yes   ◯ No

Pell Eligibility

* Are you a recipient of a Pell Grant or Pell eligible?

◯ Yes   ◯ No

First Generation College Student

* A first generation student is defined as a student for whom neither parent / legal guardian has attended college. Are you a first generation student?

◯ Yes   ◯ No

Background Information

Programs strongly encourage applications from persons from all socioeconomic, racial, ethnic, religious, and educational backgrounds and persons from groups underrepresented in the industry. Select any and all of the options in this section which you feel best apply to you. Please note that VMCAS uses this section for statistical purposes only and it in no way affects your application or financial aid eligibility.

* Check if any of the following apply to you:

☐ I graduated from a high school from which a low percentage of seniors receive a high school diploma.

☐ I am from a family that receives public assistance (e.g. Aid to Families with Dependent Children, food stamps, Medicaid, public housing) or I receive public assistance.

☐ I am a high-school drop-out who received AHS diploma or GED.

☐ English is not my primary language.

☐ None apply.

* To determine if you come from an economically disadvantaged background, you are asked to compare your parental family's size of household (number of exemptions listed on parent's Federal 1040 income tax forms) and adjusted gross income against the chart provided in the link below. The chart is based on 200 percent of the <u>Federal low-income poverty guidelines</u>. You should use your parents most recent tax forms regardless of age.

Your parent's family income falls within the table's guidelines and you are considered to have met the criteria for economically disadvantaged.

◯ Yes   ◯ No

* What is the type of geographic area where you were raised?

[⌄]

Explanation Statement

You may use this section to provide any relevant information not covered elsewhere in your application that you believe is important for the admissions committee(s) to know about you. Please ensure your explanation is clear, concise, and does not exceed 3,000 characters (including spaces). External links or documents are not accepted.

[   ]

0 word   0/3000

⊘ Save and Continue

Academic History

0/4 Sections Completed

0/4

High School Attended

Colleges Attended

Transcript Entry

Standardized Tests

High School Attended

Enter the high school that you graduated and received a high school diploma from. Visit the Applicant Help Center for more information.

You can edit this section after you submit your application.

⊕ **Add Your High School**

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

[   ]   [State   ▼]

* Did you graduate from this high school?

( ) Yes   ( ) No

⊘ Save This School

Colleges Attended

Report all institutions attended, regardless of:

- Their relevance to the programs you're applying to, and
- Whether the coursework completed there was transferred to another institution.

Report each institution only once, regardless of the number of degrees earned or gaps in the dates of attendance. Visit the Applicant Help Center for more information.

You must send VMCAS all official transcripts electronically or by mail; we do not accept transcripts via email.

If you attended a foreign (i.e., non-US, non-English-Canadian, or Caribbean medical school) institution, you must send VMCAS an official WES (World Education Services) ICAP course-by-course evaluation electronically. See Sending Official Transcripts to VMCAS for more information.

Once you submit your application, you cannot edit previously entered colleges and universities, but you can add new colleges and universities.

Add a College or University

Colleges Attended

Add a College or University ☒

Report all institutions attended. Once you submit your application, you cannot edit previously entered colleges and universities, but you can add new colleges and universities.

* What college or university did you attend?

BOSTON UNIVERSITY

* Did you obtain or are you planning to obtain a degree from this college or university?

● Yes   ○ No

---

* Degree Info 🗑

● Degree Awarded   ○ Degree In Progress

* What type of degree did you earn?

Select Degree Type ⌄

* What was your major?

Select Major ⌄

* When did you earn that degree?

Select Month ⌄   Select Year ⌄

What was your minor?

Select Minor ⌄

☐ Check if you were a double major

\+ Add another Degree

---

* What type of term system does this college or university use?

○ Quarter   ● Semester   ○ Trimester

* Are you still attending this college or university?

○ Yes   ● No

When did you attend this college or university?

Select the first and last terms you attended this institution, regardless of gaps in attendance.

* First Semester

Semes... ⌄   Month ⌄   Year ⌄

* Last Semester

Semes... ⌄   Month ⌄   Year ⌄

Colleges Attended

Report all institutions attended, regardless of:

- Their relevance to the programs you're applying to, and
- Whether the coursework completed there was transferred to another institution.

Report each institution only once, regardless of the number of degrees earned or gaps in the dates of attendance. Visit the Applicant Help Center for more information.

You must send VMCAS all official transcripts electronically or by mail; we do not accept transcripts via email.

If you attended a foreign (i.e., non-US, non-English-Canadian, or Caribbean medical school) institution, you must send VMCAS an official WES (World Education Services) ICAP course-by-course evaluation electronically. See Sending Official Transcripts to VMCAS for more information.

Once you submit your application, you cannot edit previously entered colleges and universities, but you can add new colleges and universities.

Add a College or University

Colleges and Universities Attended

BOSTON UNIVERSITY ✎ 🗑

August 2018 - May 2020 | Semester System | Bachelor of Science Degree Earned: **May 2020**

Transcript Types

| Official Transcript ⓘ | Not Yet Received | Order |

⚠ **Transcripts Are Required**

You can submit your application before transcripts are received. However, you **must submit all required documents in order to complete your application.**

This application requires specific transcript types from your colleges and universities attended.

UNIVERSITY OF BRISTOL ✎ 🗑

January 2021 - July 2021 | Semester System | No Degree Earned

Foreign Transcript Types

| Official Evaluation ⓘ | Not Yet Received | Order |

*Foreign transcripts (including French-Canadian Institutions) must be evaluated by World Education Services (WES) and submitted to VMCAS. VMCAS requires a course-by-course evaluation from WES. It is recommended that transcript(s) be submitted to the translation service (WES) at least one month before the VMCAS deadline.

VMCAS does not require a WES from English-speaking Canadian institutions.

Transcript Entry

To complete this section accurately, review these guidelines. For more information, visit the [Applicant Help Center](#):

- Enter all courses on your transcripts. Be sure to include courses from which you withdrew, repeated courses, ungraded labs, test credits, gym courses, orientations, or other non-graded courses.
- Use official copies of your transcripts. List your courses under the correct term, year, and class level. Department prefixes and course numbers must precisely match those on your transcripts.
- Enter all planned or in-progress courses for future terms in the application. This will allow you to match future courses to prerequisites. Ensure the date range for the institution includes all intended terms.
- Enter courses under the institution where you originally took the course, exactly as they appear on the original school's transcript. Keep in mind:
  - Dual enrollment courses (college courses taken during high school) are considered Freshman and should be listed under the college where you took them.
  - List transfer courses under the school where the credits were originally earned, not where the credits were transferred. If necessary, go back to the Colleges Attended section and add a school to enter the transfer credits for.
  - Enter grades exactly as they appear on your transcript, including any pluses or minuses. If your grades are listed as "BA," "CB," or "DC," you must list them as "AB," "BC," and "CD" for the system to recognize them. Grades that are listed as numbers (e.g., 93) will automatically convert to the equivalent CAS letter grade when you enter them.
  - Generally, study abroad coursework should be entered under the institution attended and marked as Study Abroad during Transcript Review. For more information, review the **Study Abroad or Overseas Transcripts** section of the [Applicant Help Center](#).

- Under Transcript Review, designate your primary college and specific courses as study abroad, Advanced Placement, repeated, etc.

Are you paying for the [Professional Transcript Entry (PTE) service](#)? If so, you must:

- Enter any in-progress or planned coursework prior to submitting your application.
- Complete and submit your application to at least one program.
- Request all official transcripts and WES evaluations, if applicable.

Once you submit your application, you cannot edit previously entered coursework, but you can add new coursework after you're verified.

Transcript Entry

BOSTON UNIVERSITY Transcript
Fall August 2018 - Spring May 2020

* Indicates required field

ⓘ **Alright, start by adding a semester.**

    + **Add A Semester**

* Indicates required field.

*TERM	*YEAR	*ACADEMIC STATUS	*COMPLETION STATUS
Fall ⌄	2015 ⌄	Graduate ⌄	Completed ⌄

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. ✕

ⓘ   + **Add A Course**

* Indicates required field.

Fall 2015 Graduate ✏ 🗑

*COURSE CODE	*COURSE TITLE	*SUBJECT	*CREDITS	*GRADE	CAS GRADE
Chem 411	Advanced Chem Theory	Chemistry	4.00	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**

BOSTON UNIVERSITY Transcript

Fall August 2018 - Spring May 2020

*TERM	*YEAR	*ACADEMIC STATUS	*COMPLETION STATUS
Fall ⌄	2018 ⌄	Freshman ⌄	Completed ⌄

* COURSE CODE	* COURSE TITLE	* SUBJECT	* CREDITS	* GRADE	CAS GRADE	
BIO 101	Biology	Biology ⌄	3	00 ⌄	A	A	🗑
		Select Subject ⌄		00 ⌄			🗑
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

> 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.

VMCAS Test Organization	Test Program
Math ⓘ Chemistry ⓘ English ⓘ	

Standardized Tests

You can self-report your standardized test scores or report tests you plan to take in this section. Some of the programs you apply to may require you to report certain test scores; be sure to check with your programs to ensure you're completing all requirements. Visit the Applicant Help Center for more information.

Once you submit your application, you cannot edit previously entered tests, but you can add new tests.

Note that self-reporting your scores isn't the same as providing official scores to your programs. If your programs require official test scores, see Sending Official Test Scores for more information.

I Am Not Adding Any Standardized Tests

GRE

Add Test Score

IELTS

Add Test Score

MCAT

Add Test Score

TOEFL

Add Test Score

(+) **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   [   ]

| **Save and Add Another** | **Save This Test** |

Supporting Information

0/5 *Sections Completed*

0/5

Essay

Recommendations

Experiences

Achievements

Licenses and Certifications

Essay

Your statement of purpose is a one-page essay that gives veterinary admissions committees a clear picture of who you are and, most importantly, answers the question, **why do you want to pursue a career in veterinary medicine.** Be sure to enter your entire essay in the text box below. External links or documents are not accepted. Visit the [Applicant Help Center](#) for more information.

Once you submit your application, you cannot edit this section.

* Indicates required field

Essay

* Your statement of purpose essay must answer the question: **Why do you want to pursue a career in veterinary medicine?**

Although there is no set of rules mandating what a strong statement of purpose should include, here are a few tips to help you successfully and effectively craft one:

- **Explain a defining moment** that helped steer you toward a career in veterinary medicine. Consider using that moment as the focal point of your essay. While many of you have had meaningful experiences with animals or veterinarians as children that are important, they should only be mentioned briefly.
- Many of you have had meaningful experiences with animals or veterinarians as children and these are important but should only be mentioned briefly.
- Be original and thoughtful: Discuss how you would **contribute to the profession** and patient care, all of which will help you stand out from other applicants.
- As you are telling us **why you want to pursue a career in veterinary medicine**, explain why you are a good candidate for veterinary school. Ask yourself—in a pile of 100 applications, would I enjoy reading my statement? Be sure to convey your passion for veterinary medicine in your statement.
- Your application materials already contain a summary of your accomplishments, so avoid repeating information from your transcripts or reference letters.
- Give yourself time to organize your thoughts, write well and edit as necessary.
- Ask yourself if this essay is a good representation of your character, ideals and aspirations.
- Remember to proofread!

0 word   0/3000

Recommendations

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

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

In this section, you can send requests for recommendations. Recommendations (sometimes called Letters of Evaluation, Letters of Reference, or Letters of Recommendation) are submitted by the recommenders themselves via **Letters by Liaison**, our recommender portal; they cannot be completed or submitted by the applicant or another party on behalf of the recommender. Visit the <u>Applicant Help Center</u> for more information.

You can submit your application once you request at least three recommendations; your recommenders can complete their recommendations at any time. To resend a recommendation request, click the blue pencil icon and click **Resend This Recommendation Request**.
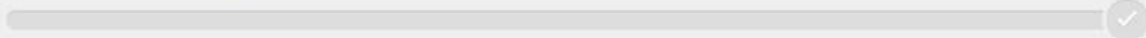
You can edit and delete requests that are in Requested or Accepted status. Once a request is Completed, you cannot make any changes regardless of whether you've submitted your application or not.
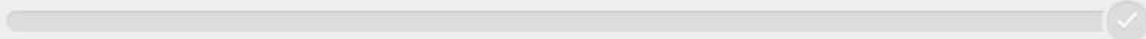
Recommendation 1
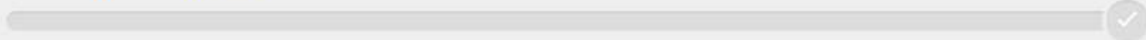
⊕ **Create Recommendation Request**

Recommendation 2

⊕ **Create Recommendation Request**

Recommendation 3

⊕ **Create Recommendation Request**

Create Recommendation Request

⊕ **Create Recommendation Request**

Create Recommendation Request

* Indicates required field

Recommender's Information

* First Name

* Last Name

* Email Address

* Due Date

📅 MM/DD/YYYY

* Personal Message to Your Recommender

0 word   0/500

Waiver of Recommendation

* I waive my right of access to this recommendation.

◯ Yes   ◯ No

* Permission to Contact Recommender

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

* Permission for Schools to Contact Recommender

☐ I understand that the schools to which I am applying may contact the recommender 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.

Enter your professional experiences in several categories, or types, in this section. Consider the duties you performed and choose the category that you think best fits the experience. Additionally, review these best practices:

- Enter only current or completed high school and college experiences. All experience hours entered must be completed by the application deadline (September 16, 2024).
- Review the Applicant Help Center for definitions and an experience chart.
- Indicate in the **Description** field if your experience was virtual or in-person.
- If your experience doesn't have a set schedule (e.g., 4 hours a week for 8 weeks), then calculate the average weekly number of hours you completed. For example, if you worked 2 hours in the first week and 8 hours in the second week for a total of 10 hours for 2 weeks, then enter 5 hours over 2 weeks.

⊕ Add an Experience

I Am Not Adding Any Experiences

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.

After experience entry, select up to 5 as your most important to highlight on your application PDF. Choose the experiences that best reflect your background or mean the most to you. You can change your selection any time before you submit your application. After submission, you may select additional experiences as most important up to the maximum but may not remove previously-designated experiences.

* Indicates required field

Experience Type

* What type of experience do you want to add? | Type   ⌄ |

Organization

* Name | |

Address | |

Address 2 | |

City | |

* Country | Select Country   ⌄ |

Zip Code | |

* State/Province | Select a State/Province   ⌄ |

Supervisor

First Name

Last Name

Title

Contact Phone
🇺🇸 ▾ (201) 555-0123

Contact Email

Experience Dates

* Start Date
📅 MM/DD/YYYY

* Current Experience
○ Yes   ○ No

* End Date
📅 MM/DD/YYYY

* Status
Status ⌄

Experience Details

* Title

* Type of Recognition

☐ Compensated

☐ Received Academic Credit

☐ Volunteer

* Average Weekly Hours
[   ] **x**

* Number of Weeks
[   ] **=**

* Total Hours
[   ]

* Description/Key Responsibilities

0 word   0/600

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

Achievements

Enter any relevant professional or academic achievements in several categories, or types, in this section. Click here to review the definitions, consider the achievement you earned, and choose the category that you think best fits.

Once you submit your application, you cannot edit previously entered achievements, but you can add new achievements.

⊕ **Add an Achievement**

I Am Not Adding Any Achievements

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.

* Indicates required field

Achievement Details

* Type	Select Achievement Type ⌄	
* Name	Awards	
	Honors	
Name of Presenting Organization	Scholarships	
Issued Date	📅 MM/DD/YYYY	
Brief description		

0 word   0/600

⊘ Save This Achievement

Licenses and Certifications

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 Licenses and Certifications, but you will not be able to update or delete completed Licenses and Certifications.

Add any current professional licenses and certifications that you have in this section. Click here for more information.

Once you submit your application, you cannot edit previously entered licenses and certifications, but you can add new licenses and certifications.

⊕ Add a License or Certification

I Am Not Adding Any Licenses or Certifications

Licenses and Certifications

Add Your Licenses and Certifications ☒

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 Licenses and Certifications, but you will not be able to update or delete.

* Indicates required field

Details Name

* Type	Select Type ⌄
* Title	
* Organization Name	
Number	
Issued Date	🗓 MM/DD/YYYY
Valid Until	🗓 MM/DD/YYYY
Brief Description	

0 word   0/600

⊘ Save & Continue