

CHECK-LIST OF REQUIRED ITEMS

Application for Transfer Students

1. **"Application for Admission by Transfer"**
2. **"Official Transcripts of All College Courses"** *
3. **"Official Transcripts of All Courses Taken at Veterinary School(s)"** *
4. **"Graduate Record Examination Scores"**: General GRE Test. Must have been taken within FOUR years prior to application.
5. **"Test of English as a Foreign Language"** score of 550 or above. (When native language is other than English)
6. **"Letters of Evaluation"**: THREE required. One from the Academic Dean (verification of good academic standing), one from a faculty member of your present school, and one from a veterinarian who has employed you.
7. **\$100 non-refundable processing fee**. Make checks payable to OSU-CVHS.
8. **All application materials must marked "Attn: Transfer Admissions"** and mailed to the address below:

Attn: Transfer Admissions
Oklahoma State University - CVHS
112 McElroy Hall
Stillwater, OK 74078

* If these transcripts are in a foreign language, please have them translated. You are advised to contract a company in the United States (e.g., World Education Services, P. O. Box 745, Old Chelsea Station, New York, NY 10113-0745) that will make comparison of courses and grades to those of U.S. schools.

**CENTER FOR VETERINARY HEALTH SCIENCES
OKLAHOMA STATE UNIVERSITY**

APPLICATION FOR ADMISSION BY TRANSFER

1. Full Legal Name

2. Previous Last Name

3. Gender 4. Social Security Number

5. Mailing Address & Phone Number
(Street, Box, Route, Apt #)
(City, State, Zip)
(Area Code/Tel Number)

6. Permanent Mailing Address & Phone Number
(Street, Box, Route, Apt #)
(City, State, Zip)
(Area Code/Tel Number)

7. Cell Phone Number

8. Email Address

9. I am a resident of: (Name of State)

10. I am a citizen of: (Name of Country)

*Correspondence pertaining to your application will be sent here. The applicant is responsible for notifying the Admissions Office of any change of address.

11. List all professional schools which you have applied to and the year(s) of application.
(If more space is needed, please print on separate sheet)

School(s)	Year(s) of Application

10. Have you ever been dismissed by any professional school (including veterinary school)?
11. Have you ever been convicted of possession, use, or distribution of controlled drugs?
12. Have you ever been convicted of either a felony or misdemeanor other than a minor traffic violation?
13. Have you been found by any school authorities or by any court to have disrupted or interfered with the orderly conduct, processes, functions, or programs of any educational institution?

If you replied "Yes" to 9, 10, 11, or 12, please give details on a separate sheet of paper.

EDUCATION

Preparatory or High School	City/State	Year of Graduation

List in chronological order all colleges/universities attended and attach English language transcripts from each.

College/University	Dates Term & Year	Degree (BS, BA, MS, etc.)	Date Received or Expected

List all dates you took the General Graduate Record Examination. Submit the most recent scores of these tests. (This must have been within four years of the date of this application)

Date	Date	Date	Date

In a one-paragraph statement, please state your reason(s) for wishing to transfer to Oklahoma State University.

Ask the academic dean, one faculty member at your present school, and one veterinarian who has employed you to write letters of evaluation to the Associate Dean of Academic Affairs, College of Veterinary Medicine, Oklahoma State University.

WORK EXPERIENCE

Dates of Employment From ____ to ____	Approx. Hours Worked per Week	Name & Address of Employer & Brief Description of Type of Work Responsibilities

PERMISSION AND CERTIFICATION: I certify that the information contained in all pages of this application is true and correct, to the best of my knowledge. I further grant permission to the Professional Standards Committee to have access to the record of any disciplinary action or other pertinent information contained in my file at each college/university in which I have been or am now enrolled. I understand that withholding or misrepresenting any information pertaining to my application will be considered adequate grounds for denying me admission to or dismissing me from the professional program in veterinary medicine.

Signature of Applicant

Date

This sheet has been designed answer college information needed for statistical reporting to various state and federal agencies as well as to the American Veterinary Medical Association and the Association of American Veterinary Medical Colleges. The information is voluntary and will in no way affect your application for admission.

Predominant Ethnic Identity: (Check only one)

- White/Caucasian Asian or Pacific Islander
 Black (Afro American, Non-Hispanic) American Indian/Alaskan
 Hispanic

Date of Birth (MO/DAY/YEAR): Birthplace City/State:

Father/Guardian

Name

Living:

Street, Route, or Box Number

City

State Zip

Present Occupation

Former Occupation, if retired or deceased

Mother/Guardian

Name

Living:

Street, Route, or Box Number

City

State Zip

Present Occupation

Former Occupation, if retired or deceased

Oklahoma State University, in compliance with Title VI of the Civil Rights Act of 1964 and Title IX of the Education Amendments of 1972 (Higher Education Act), does not discriminate on the basis of race, color, national origin, sex, qualified handicap or disability in any of its policies, practices, or procedures. This provision includes but is not limited to admissions, employment, financial aid, and education services.