

**THE UNIVERSITY OF NORTH CAROLINA AT PEMBROKE/
NC STATE VETERINARY MEDICINE SCHOLARS PROGRAM**

Biology Department

Post Office Box 1510 • Pembroke, NC 28372
Phone: 910.521.6245/Fax: 910.522.5754

High School _____

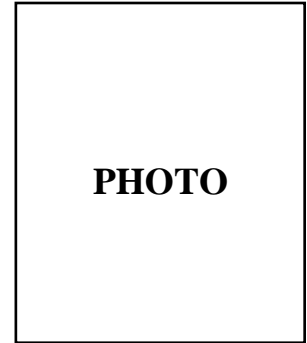
Class Rank _____

Grade Point Average _____

COLLEGE ADMISSION TEST(S):

SAT: Verbal Score _____ Math Score _____ Total Score _____

ACT: Verbal Score _____ Math Score _____ Composite Score _____



INSTRUCTIONS: Please complete all sections of this application. **Non-typed applications will be eliminated from consideration.**

Note: Application Will Be Reviewed Only After Receipt Of All Requested Materials.

1. **DUE DATE:** Application must be postmarked by September 6, 2019.
2. **CANDIDATE SELECTION:** Candidates will be selected for a preliminary interview with UNCP. Candidates selected from the UNCP preliminary interviews will be notified for a final interview.
3. **TRANSCRIPT(S):** Contact all schools you have attended to send official transcript(s) to the UNCP/NC State Veterinary Medicine Scholars Program at the above address.
4. **PHOTOGRAPH:** Attach a photograph (headshot) with the application.
5. **RECOMMENDATION:** Request 2 instructor appraisal forms (see attached) to be submitted by your high school counselor or science/math instructor by September 6, 2019.

PERSONAL INFORMATION

1. NAME _____ DATE OF BIRTH _____

Banner ID# _____

ETHNICITY: African American/Black Native American/American Indian Latino/Hispanic
 Asian American/Pacific Islander Caucasian Other (Specify) _____

2. CITIZENSHIP: U.S. Other (specify) _____

If US Citizen, state of legal residence _____

3. CURRENT ADDRESS TO BE USED UNTIL _____ (Month Day Year)

Number/Street _____ City _____ State _____ Zip Code _____

PHONE/CELL# _____ UNCP EMAIL ADDRESS _____
(Area Code) Telephone & Cell Number(s)

4. PERMANENT ADDRESS, if different from current _____
(Area Code) Telephone Number _____

Number/Street _____ City _____ State _____ Zip Code _____

This publication is also available in alternative forms upon request.
Please contact Accessibility Resource Center. DF Lowry Building 910.521.6695

5. PARENT/GUARDIAN _____ City/State _____
Area Code/Telephone Number (Home) _____ (Office) _____

EDUCATION/ACHIEVEMENTS - Please attach a copy of your high school transcript.

1. LIST IN CHRONOLOGICAL ORDER, BEGINNING WITH HIGH SCHOOL, ALL SCHOOLS, COLLEGES AND UNIVERSITIES ATTENDED.

INSTITUTION	DEGREE	DATES ATTENDED

2. LIST HONORS/SCHOLARSHIPS RECEIVED IN HIGH SCHOOL.

3. LIST EXTRACURRICULAR, VOLUNTEER AND COMMUNITY ACTIVITIES IN WHICH YOU PARTICIPATED

4. LIST ANY PRE-HEALTH RELATED INVOLVEMENT/OPPORTUNITIES.

5. HOW DID YOU LEARN ABOUT THE UNCP/NC STATE VETERINARY MEDICINE SCHOLARS PROGRAM?

- Admissions Counselor UNCP Campus Flyer Health Advisor
 High School Counselor Instructor/Science Faculty Other (Specify) _____

ESSAY

In the space provided below, describe in **500+** words your background, health career goals, interest in veterinary medicine and motivation toward these goals. Why would you be a good candidate for the UNCP/NC STATE Veterinary Medicine Scholars Program and what benefits do you expect to receive?

I CERTIFY THAT THE INFORMATION SUBMITTED IN THIS APPLICATION IS COMPLETE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.

Signature of Applicant _____ Date _____

**THE UNIVERSITY OF NORTH CAROLINA AT PEMBROKE/
NC STATE VETERINARY MEDICINE SCHOLARS PROGRAM**

INSTRUCTOR APPRAISAL FORM

Directions: Please complete by PRINTING or TYPING this form for _____
Name

who has applied for admission to the UNCP/NC STATE Veterinary Medicine Scholars Program

Please return completed form to: **BIOLOGY DEPARTMENT**
THE UNIVERSITY OF
NORTH CAROLINA AT PEMBROKE
Post Office Box 1510 Pembroke, NC 28372
910.521.6245

1. I have known the applicant for a period of _____ in the following capacity _____

2. The applicant ranks academically with other students taught in recent years as follows:

Top 5% ____ Top 10% ____ Top 25% ____ Average ____ Below Average ____

3. Please rank the applicant on the following traits, relative to other students you have taught.

	Excellent 5	Good 4	Average 3	Fair 2	Poor 1	No Opportunity to Observe	Comments
Intellectual Ability							
Communication Skills							
Emotional Stability							
Study Habits/Skills							
Attendance/Punctuality							
Comprehension							
Accuracy/Attention to Detail							
Maturity/Judgment							
Motivation/Perseverance							
Dependability							
Initiative/Industriousness							
Cooperative Attitude							
Ingenuity							
Leadership/Leadership potential							

4. Major strengths of this student as a prospective participant in the UNCP/NC STATE Veterinary
Medicine Scholars Program are _____

5. The ability of the applicant to successfully pursue a veterinary graduate program is perceived as follows:

Excellent_____ Good_____Average_____ Fair_____Poor_____ Unsatisfactory_____

6. The applicant as an NC STATE Veterinary Medicine Scholars Program candidate is:

Recommended with Confidence_____ Recommended_____

Recommended with Reservations _____ Not Recommended_____

NAME OF PERSON COMPLETING THIS FORM (Print or Type)

Title _____ Department_____

High School _____ Telephone_____

School Address_____

Note: Please add any relevant information

Signature_____ Date_____