

TUSKEGEE UNIVERSITY

COLLEGE OF VETERINARY MEDICINE SUPPLEMENTAL APPLICATION

Name: _____
Last First Middle

Mailing address: _____
Number and Street Name

City State Zip Code County

Permanent address: _____
Number and Street Name

City State Zip Code County

Home Phone Number: (_____) _____ Cell Phone Number: (_____) _____

E-mail Address: _____

Date of Birth: _____ Social Security Number: _____
(Required for Federal Financial Aid)

Place of Birth: _____
First Generation Student*: YES NO

Gender: Female Male Age: _____ Marital status: _____

Are you a U.S. citizen? YES NO If "no, name country of citizenship: _____

Permanent Resident: YES NO

State of legal residency: _____

Regional Plan (KY or SC): YES NO

Application for Enrollment in: Fall 20_____ Full-time

What is your intended academic professional program? _____

Option (if applicable) _____

Have you ever applied to or been enrolled at Tuskegee University? YES NO

If yes, when? Year _____ Major _____

Residence: On-Campus/Resident Off-Campus/Commuter

- Race/Ethnicity:** (please only select one)
- American Indian or Alaskan Native
 - Asian or Pacific Islander
 - Black or African-American
 - Caucasian
 - Puerto Rican
 - Other (please specify)

List all colleges/universities you have attended:

Name of College/University	City, State	Attendance Dates
Name of College/University	City, State	Attendance Dates
Name of College/University	City, State	Attendance Dates
Name of College/University	City, State	Attendance Dates

What is your college grade point average? _____ (Based on a 4.0 scale)

Have you been placed on probation, suspended or dismissed from any high school or college? YES NO

If yes, are you eligible for readmission there? YES NO

Have you ever received a restraining order, protective order or similar directive to avoid contact with a group or individual? YES NO

If yes, please provide the admissions office with documentation. _____

Have you been convicted of a criminal offense other than a minor traffic violation? YES NO

Are there such criminal charges pending against you at this time YES NO If yes, please provide the admissions office with documentation.

Veteran YES NO

Medical problems YES NO If yes, please explain: _____

Physical disabilities YES NO

I understand that any misrepresentation of the facts on this application or adverse change in my academic performance may result in the refusal of admission, withdrawal of admission acceptance, cancellation of enrollment, dismissal, and/or other disciplinary action. All materials submitted for admission become the property of Tuskegee University.

Signature _____

Date _____

Mail your completed application to:

Tuskegee University
Office of Admissions and Enrollment Management
Margaret Murray Washington Hall
1200 Old Montgomery Road
Tuskegee Institute, Alabama 36088

Diversity Questionnaire:

The Admissions Committee attempts to select from among several hundred academically qualified students to select the best possible candidates to serve society as veterinarians. Since a heterogeneous society is served best by people who reflect its make-up, our selection process now includes a “disadvantaged” category to increase opportunity for those traditionally under- represented in the veterinary profession.

All the candidates have the opportunity to submit additional information on this questionnaire, which will identify students from disadvantaged backgrounds. Only a candidate who believes that one or more of the following factors have affected his /her academic performance should complete the questionnaire:

- 1. Cultural-social conditions
- 2. Economic hardships
- 3. Educational limitations
- 4. Personal problems
- 5. Other (specify)

The Admissions Committee will evaluate this information and verification of any information supplied may be requested.

1. Check any of the areas below and explain in the space provided why you believe these circumstances in your background should be considered in determining your eligibility for the disadvantaged category:

- Cultural Personal Economic Social Educational
 - Other (unique and/or restrictive circumstances which affected academic achievement) _____
-

Your explanations are very important for your evaluation by the committee. Please be specific and complete.

2. Have you contributed to the support of your parents and/or siblings? Yes No If yes, explain: _____

3. Are you head of the household? Yes No If yes, explain: _____

4. Answer any or all of the following that apply to you;

- Immigrant (please provide details in space below)
- From single parent home. Inclusive dates: _____
- Live on reservation. Inclusive dates: _____ Tribal number: _____
- English is second language: Parents Yourself
- Migrant or farm worker; Describe type of farm: _____
- Live in urban city: state amount of time living under conditions: Live on farm. Number of acres: _____
- Live in rural area. Amount of time: Reared in foster home. Amount of time: _____
- For any item above or other, supply additional information or comments, if necessary below: _____

5. Did you spend your formative years in an economically depressed area? Yes No

If yes, name community or area of city; and, explain why you consider it economically depressed? _____

6. Did you change schools frequently between grades 1-12? Yes No If yes, explain how this affected you: _____

7. List chronologically high school(s):

Name	City and state	Size of graduating class

8. Information about parents/guardians:

Father/Guardian

Mother/Guardian

a. Name _____

b. Birthplace _____

c. If deceased, when? _____

d. Marital Status _____

- Married
- Separated
- Divorced
- Divorced/Remarried
- Widowed
- Single

- Married
- Separated
- Divorced
- Divorced/Remarried
- Widowed
- Single

e. Highest level of formal education obtained:

<input type="checkbox"/> Didn't attend school	<input type="checkbox"/> Didn't attend school
<input type="checkbox"/> Graduated from elementary school	<input type="checkbox"/> Graduated from elementary school
<input type="checkbox"/> Graduated from high school	<input type="checkbox"/> Graduated from high school
<input type="checkbox"/> Graduated from a 4-year college or university	<input type="checkbox"/> Graduated from a 4-year college or university
<input type="checkbox"/> Received a master degree	<input type="checkbox"/> Received a master degree
<input type="checkbox"/> Received a doctoral degree	<input type="checkbox"/> Received a doctoral degree

9. Were there prolonged periods of economic instability in your family? Yes No If yes, explain how this affected your academic performance: _____

10. Other factors and how they affected your academic performance: _____

I certify that the information submitted in this application is true and correct to the best of my knowledge. I agree to provide, in a timely manner, if requested, any official documentation necessary to verify information provided in this application. I understand that false information or misrepresentation in this application may result in cancellation of admission, if admitted to the College of Veterinary Medicine.

Signature

Date

A completed supplemental application packet includes the following:

- Completed four-page supplemental form
- \$100 supplemental application fee payable to: "Tuskegee University" (No checks or cash)
- GRE scores from ETS (University code: 1813, Department code: 0617)
- Digital Passport Standard photo

The completed four-page supplemental form and supplemental application fee should be place in ONE envelope and mailed to:

Office of Veterinary Admissions
College of Veterinary Medicine Patterson Hall
1200 West Montgomery Road, Tuskegee University Tuskegee, AL 36088

Additional items required for application completion are:

- VMCAS application
- Completed supplemental application.
- Supplemental Application fee
- All official transcripts for institutions attended

Incomplete applications will NOT be considered.