

VetCAMP 2017

Veterinary Career Aptitude and Mentoring Program

Application Form

I. Personal Data

Name: _____
First Name Middle Initial Last Name

Address: _____

City: _____ State: _____ Zip: _____

Gender: Male Female Email Address: _____
(We use email as the primary mode of communication)

Current GPA: _____ Scrub Top Size: _____ Scrub Pant Size: _____ T-shirt Size: _____

(Colleges and universities are asked by many entities to describe the racial/ethnic backgrounds of its program participants. In order to respond to these requests, we ask you to please answer the following optional question.)

Ethnicity: Hispanic White Black or African American American Indian or Alaska Native
Native Hawaiian or Pacific Islander Asian Other _____

II. Academic Information

Please check the appropriate box:

Classification Fall Semester, August 2017

High School Junior High School Senior Graduate May 2017

High School Name: _____

City: _____ State: _____ County: _____

Name of Guidance Counselor/Advisor at your school: _____

III. Emergency Contact Information

Name: _____
First Name Middle Initial Last Name

Relationship: _____

Home #: _____ Cell/Work #: _____ Email: _____

Signature of Parent or Guardian: _____

Return To:

University of Georgia
College of Veterinary Medicine
Office of Academic Affairs
C/o VetCAMP
Athens, GA 30602

Have you participated in a VetCAMP program prior to this opportunity?

Yes No

If yes, where was it held? _____