

**Kansas State College of Veterinary Medicine
Supplemental Application (in addition to VMCAS)**

A complete supplemental application packet includes the following: completed two-page supplemental form, copies of transcripts from all colleges/universities you have attended, copy of your GRE score report (from the ETS website OR a photocopy), \$50 USD Non-refundable application fee. All of the packet materials should be placed in ONE envelope.

Last Name: First Name: Middle Name:

Other last names under which your records may be found:

Present mailing address – Street:

City: State: Zip:

County: Telephone: Cell Phone:

Permanent Address - (where mail will always reach you)

Name:

Street:

City: State: Zip:

County: Telephone: Cell Phone:

E-Mail Address:

Alternate E-mail Address:

Of what state are you currently a resident:

Are you considered an international student? Yes No Country of origin:

Birth Date: City: State:

Age as of August 1, 2018:

High School Graduated from:

City: State:

Date of High School Graduation - Month: Year:

Active Duty Military Service: Yes No If yes, Dates:

If yes, Branch of Service:

Are you a dependent of someone in the military service: Yes No

What is your race? Select one or more of the following categories:

American Indian or Alaska Native Asian Black or African American

Native Hawaiian or Pacific Islander White

Are you Hispanic/Latino? Yes No

Sex: Marital Status:

Are you a U.S. citizen: Yes No If No, Visa Type:

If you are currently living in Kansas, when did you gain legal Kansas residency – Month: Day: Year:

Of what state will you be a legal resident for tuition purposes, on August 1, 2018:

Of what state does the university you are now attending classify you as a resident:

List the number of college credit hours earned while in high school: List GPA of your last 45 semester hours of undergraduate work:

List the number of semesters or quarters in which you took more than 14 hours:

Will you have completed a degree by August 1, 2018? Yes No If yes, give degree title (BA, BS, MS, PhD, etc.):

List ALL Colleges/Universities Attended	City, State	Dates Attended

Were you ever required to leave school or college or were you ever denied readmission because of deficiencies in either conduct or scholarship? Yes No If yes, please explain:

Have you applied at any previous time for admission to the College of Veterinary Medicine at Kansas State University? Yes No
If yes, what year(s):

List the following anticipated course schedules.
Fall 2017 Course Schedule:

College/University where you will take the course	Course Name	Hours

Spring 2018 Course Schedule:

College/University where you will take the course	Course Name	Hours

Are you interested in pursuing a DVM/PhD dual degree? Yes No

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- Copy of your GRE score report (from the ETS website OR a photocopy)
- \$50 USD Non-refundable application fee made payable to College of Veterinary Medicine

All of the packet materials should be placed in ONE envelope and mailed to:

Office of the Associate Dean for Admissions, 103 Trotter Hall, College of Veterinary Medicine
Kansas State University, Manhattan, KS 66506

Incomplete applications will NOT be considered.

The information provided on this form is complete and truthful to the best of my knowledge:

Signature

Date