THE UNIVERSITY OF MISSOURI - COLUMBIA SCHOOL OF VETERINARY MEDICINE
AgScholars Program

INSTRUCTIONS FOR APPLICANTS

Current High School Seniors

1. Achieve a composite score of 27 on the American College Test (ACT) or an equivalent score on the Scholastic Aptitude Test (SAT). Copy of scores must be sent from High School with transcript or copy of sent directly to the Veterinary School.

2. Complete the enclosed Application.

3. Fill out the top line and the bottom portion of the Guidance Counselor Report and give it to your counselor for completion. An official copy of your transcript of high-school work completed, through fall of senior year, must be attached to this report from your counselor.

4. Fill out the top line and the bottom portion of each of the Admission Evaluation Forms. Two forms should be completed by your teachers, at least one of who is a science teacher. The other form may be completed by a teacher or by another person who knows you well. (three evaluations, in addition to the Guidance Counselors Report, must be submitted to complete the application) Additional evaluations not received.

5. Complete an application for admission to the undergraduate program at the University of Missouri-Columbia. (Failure to complete this application makes you ineligible for the AgScholar Program.)

6. It is suggested that you give your counselor and each of your evaluators a return envelope that has already been stamped and addressed to AgScholar Program, W203 Vet. Med. Bldg., UMC, Columbia, MO 65211.

7. Applications must be received in our office by April 1 of senior year or September 15 as MU freshman. (Early submission receives no advantage)

8. The selection committee will meet after the submission deadline(s) to review applications and applicants notified of decisions shortly after.

Current University of Missouri-Columbia Freshmen (1st semester freshman follow HS instructions above)

1. Achieve a composite score of 27 on the American College Test (ACT) or an equivalent score on the Scholastic Aptitude Test (SAT). Copy of scores must be sent from High School with transcript or copy of sent directly to the Veterinary School.

2. Complete the enclosed Application.

3. Fill out the top line and bottom portion of the Guidance Counselor Report and give it to your high-school counselor for completion. An official copy of your final high-school transcript must be attached to this report from your counselor.

4. Fill out the top line and bottom portion of each of the Admission Evaluation Forms. At least one form must be completed by a high-school science teacher and at least one form by an MU professor from whom you took a course this academic year. (If applying Sept. 15th no MU faculty is required) The other form may be completed by an instructor (high-school or MU) or by another person who knows you well.

5. It is suggested that you give your counselor and each of your evaluators a return envelope that has already been stamped and addressed to The University of Missouri, AgScholars Program, W203 Vet. Med. Bldg., Columbia, MO 65211.

6. After Fall grades have been posted on your MU transcript, request an official transcript to be sent to the address in #5 above. (If applying Sept. 15th no fall grades are needed)

7. The deadline for applications to be received in our office for MU freshmen is September 15 or April 1.

8. The selection committee will meet after the submission deadline(s) to review applications and applicants notified of decisions shortly after.
APPLICATION FOR MATRICULATION

INSTRUCTIONS: Please print or type

Optional:

ACT SCORE __________

(Minimum to Apply: 27 ACT or equivalent SAT)

Name _________________________________________________________________________________

Last     First     Middle

Permanent Address

Street and Number     City, State, Zip

Telephone No. (____) _____________________

Area Code     Number

Birthday _______________ Place of Birth __________________________________________

Month     Day     Year

U.S. Citizen _____ Yes _____ No

Permanent U.S. Resident _____ Yes _____ No

Father/Guardian __________________________________________________________

Address ___________________________________________________________

Street and Number

Telephone ____________________

City, State, Zip

Mother/Guardian __________________________________________________________

Address ___________________________________________________________

Street and Number

Telephone ____________________

City, State, Zip
List, in order, all high schools attended:

<table>
<thead>
<tr>
<th>Name of High School</th>
<th>City and State</th>
<th>Dates of Attendance</th>
<th>Graduation Year</th>
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<tbody>
<tr>
<td>Current</td>
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<tr>
<td>Previous</td>
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</tbody>
</table>

List high school courses taken that were Honors courses

List high school courses for which advanced placement was received

Have you taken college courses while in high school?  ____ Yes  ____ No

If yes, indicate the institution, courses, and grades received

School activities

Other activities (community, church, employment, medically-related, etc)

Honors received

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**Additional Information Requested for MU Student**

MU Address ___________________________ Telephone No. ___________________________

Semester Enrolled at MU ___________________________ Student ID# ___________________________

Courses for which advanced placement or CLEP credit was received ___________________________

General Honors courses taken ___________________________

Activities ___________________________

Honors received ___________________________

Academic advisor ___________________________ Telephone No. ___________________________
In the space provided, please describe your experience or interest in livestock production and health. (Such as participation in a livestock enterprise as either a family member or employee; high school enrollment in at least two years of agriculture course work; or participation in FFA, 4H or equivalent organizations with projects directly related to either livestock production or health.)

Candidate Signature ___________________________________________ Date ____________________
AgScholars Program

GUIDANCE COUNSELOR REPORT
(Must be received in our office by April 1 or September 15)

Candidate’s Name__________________________________________   Social Security No.________________

Please complete both sides of this form and attach a copy of the candidate’s transcript as well as results of the student’s performance on the Scholastic Aptitude Test (SAT) or American College Test (ACT) and any achievement tests. This report is confidential and will be available only to those involved in our admission process. Supplementary transcripts of the applicant’s performance in the senior year should be sent as they become available.

Counselor’s Name_________________________________________    Position_________________________

(Please print)

School Address_____________________________________________________________________________

Street address   City State Zip

Telephone number (_____ )____________________________________   School’s Code Number___________

Number   Extension

Length of time acquainted with candidate

Grade point average to date is ______________________ based on a scale with A=__________________.

The candidate’s rank is __________________ * in a class of __________________ students.

Give an approximate percentage of the candidate’s graduating class that plans to attend a four-year college?

________________________

*(If no rank is available, please enclose information which allows the faculty committee to assess the candidate’s academic strength in relation to fellow students.)

------------------------------------------------------------------------------------------------------------------

To be completed by the candidate (please sign A or B):

A: I hereby waive my right to see this evaluation should I matriculate at the University of Missouri-Columbia.

Signature_______________________________________________________   Date __________________

B: I decline to waive my right to see this evaluation should I matriculate at the University of Missouri-Columbia.

Signature_______________________________________________________   Date __________________
Please write a current appraisal of the candidate’s academic and personal qualities and promise as a candidate for the AgScholars program. We are particularly interested in evidence of the student’s character, maturity, independence, values, and any special talent or quality that the candidate possesses. We are interested in a brief narrative that will give us added insight into the strengths and weaknesses of the candidate. (If you attach a letter of recommendation, please also provide a rating and your signature below.)

In view of this applicant’s strengths and weaknesses, how well do you believe he or she is suited to the study and preparation for a professional career? (Circle the appropriate number.)

1  2  3  4  5  6
Marginal Average Outstanding

Signed

Mail this form and all requested supporting materials to: Office of Admissions, W-203 Veterinary Medicine Building, College of Veterinary Medicine, University of Missouri, Columbia, MO 65211.
INSTRUCTIONS FOR EVALUATORS

(Must be received in the Dean’s office by April 1st from HS seniors or September 15 for MU Freshman)

The person who gave you this form has applied to the University of Missouri-Columbia College of Veterinary Medicine. The applicant believes you have had sufficient contact with him/her to provide an evaluation of qualities that might relate to future performance as a veterinarian. Your evaluation should be based on comparison with other students you have known. In the space provided, please indicate the peer group which you are comparing this applicant. It is important to complete and return this evaluation form. If you wish, you may attach a letter of recommendation.

IN MARKING THE EVALUATION, WE ENCOURAGE YOU TO FOLLOW THESE GUIDELINES:

Rate the applicant on a scale of 1 to 6 on the lines to the left of each statement. On this scale, a 6 is the highest possible rating and should be reserved for the most outstanding individuals based upon the particular characteristic. Accordingly, a 1 is the lowest rating and should be reserved for those individuals who are seriously deficient in this quality.

In order for this rating system to have maximum usefulness, we ask you to guard against inflating your ratings. It is assumed that the average applicant would receive ratings of 3 or 4 on some or all of the characteristics. If your rating is low average or below (1, 2, 3), please provide comments that would enable us to further evaluate the candidate. If you have no information or insufficient information to answer on a particular quality, put an X on the line. Where possible, expand your ratings by giving specific instances or descriptions of behavior in the space following each item. On the back page, please discuss other relevant instances or describe behavior of the applicant which led you to assign your rating. Your comments will greatly aid us in the evaluation of the applicant.

If you have any questions regarding the completing this form, please don’t hesitate to contact the Office of Admissions, at 573-884-3341. After completing this form, please return it to: Office of Academic Affairs, College of Veterinary Medicine, University of Missouri, Columbia, MO, 65211.

Thank you for your assistance.

The Family Educational Rights and Privacy Act (The Buckley Amendment) provides that, should the applicant matriculate, he/she will be entitled to inspect all records kept by the College of Veterinary Medicine, including the evaluation forms. However, the applicant may waive the right to inspect the evaluation form by signing in the appropriate place on the form.

“tear off and discard”
THE UNIVERSITY OF MISSOURI-COLUMBIA
COLLEGE OF VERINARY MEDICINE
AgScholars Program

ADMISSION EVALUATION FORM

Candidate’s Name _____________________________    Social Security Number ___________________
Evaluator’s Name _____________________________     Title ________________________________
Address ______________________________________________________________________________
____________________________________________________________________________

NOTE: Please refer to the instructions for evaluators before completing the form.

With what peer group are you comparing this applicant?

Under what circumstances and during what period have you known this applicant?

To be completed by candidate (Please sign A or B):

A. I hereby waive my right to see this evaluation should I matriculate at the University of Missouri-
   Columbia.

   ___________________________________________    _____________________
   Signature                                                                 Date

B. I decline to waive my right to see this evaluation should I matriculate at the University of Missouri-
   Columbia.

   ___________________________________________    _____________________
   Signature                                                                 Date
Please feel free to add relevant comments and specific examples in the space provided following each item. If your ratings are low average or below (1, 2, 3), your added comments will help us evaluate the applicant. Using 1 (Low) to 6 (High) and an X for unable to evaluate, rank the degree to which the person…

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<table>
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<tr>
<td>1</td>
<td>Is able to get at the heart of a problem; able to separate important points from details; has an orderly, logical mind; is mentally efficient.</td>
</tr>
<tr>
<td>2</td>
<td>Forthright, frank and open.</td>
</tr>
<tr>
<td>3</td>
<td>Adaptable; is able to adjust to new knowledge and changing conditions.</td>
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<td>4</td>
<td>Is able to convert acquired information into working knowledge; is decisive.</td>
</tr>
<tr>
<td>5</td>
<td>Inspires confidence.</td>
</tr>
<tr>
<td>6</td>
<td>Emotionally stable; projects a stable, calming influence in tense situations.</td>
</tr>
<tr>
<td>7</td>
<td>Sustained, genuine concern for others; is considerate of others; is an understanding sort of person.</td>
</tr>
<tr>
<td>8</td>
<td>Foresight, the ability to anticipate problems.</td>
</tr>
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<td>9</td>
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11. Is able to communicate well in everyday activities.

12. Is a person of integrity, is highly principled; is honest.

13. Is able to learn from others; is charitable toward mistakes and failures of others; is adaptable to all sorts of people.

14. Is motivated toward a career in Veterinary Medicine primarily by idealism, compassion, and the desire to serve others.

15. Is aware of his/her own limitations and tolerant of the opinions and lifestyles of others.

16. Has a warm, outgoing, friendly personality; is cheerful, optimistic; has a sense of humor.

17. In view of this applicant’s strengths and weaknesses, how well do you believe he or she is suited to the study and preparation for a professional career? (Circle the appropriate number).

1  2                3                4                5               6
Marginal                                         Average                              Outstanding

Other specific instance, behaviors of the applicant, and summary comments are welcomed here:

Signature of Evaluator ________________________________     Date _______________
AgScholars Program

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   _____________________________               _____________________
   Signature                                                                  Date

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_____ 1. Is able to get at the heart of a problem; able to separate important points from details; has an orderly, logical mind; is mentally efficient.

_____ 2. Is forthright, frank and open.

_____ 3. Is adaptable; is able to adjust to new knowledge and changing conditions.

_____ 4. Is able to convert acquired information into working knowledge; is decisive.

_____ 5. Inspires confidence.


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_____ 8. Has foresight, the ability to anticipate problems.

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1 Marginal  2 Average  3 4 Outstanding

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