

# Delaware Veterinary Medical Association

The Delaware Veterinary Medical Association (DVMA) is proud to offer a Veterinary Scholarship for veterinary students. A \$1000 scholarship will be awarded to a veterinary student in their second, third or fourth year of veterinary school. The DVMA has established this scholarship for veterinary medical students from Delaware to assure the continuation of expert animal care and the scientific advancement of veterinary medicine.

## Criteria for Selection

1. Student must be a Delaware resident as defined by at least one of the following criteria:
  - (a) Graduate of a Delaware high school
  - (b) Resided in Delaware for at least three years
  - (c) Permanent mailing address in Delaware
2. Student must have a grade point average of at least 2.5 to apply
3. Scholarship is open to veterinary students completing their first, second or third year of veterinary school.
4. Previous recipients may apply, however first preference will be given to new applicants.

*If you meet the above criteria, please complete the following application:*

### I. Personal Data

Name: \_\_\_\_\_  
Present Address: \_\_\_\_\_  
Permanent Address: \_\_\_\_\_  
Current Telephone: \_\_\_\_\_  
Permanent Telephone: \_\_\_\_\_  
State of Residency: \_\_\_\_\_  
Student ID Number: \_\_\_\_\_  
Name/Date of High School Graduation: \_\_\_\_\_  
Please list dates of residence in Delaware: \_\_\_\_\_

### II. College Education

Name of School: \_\_\_\_\_  
City, State \_\_\_\_\_  
Degree received/GPA/Major/Date: \_\_\_\_\_

Name of School: \_\_\_\_\_  
City, State \_\_\_\_\_  
Degree received/GPA/Major/Date: \_\_\_\_\_

III. Awards

Name/Sponsor/Date awarded: \_\_\_\_\_  
Name/Sponsor/Date awarded: \_\_\_\_\_

IV. Professional and Volunteer Activities/Community Involvement: (include organizations, offices held, honors received and major accomplishments.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

V. Work History: (include a **brief** description of previous employment that you feel improves your chance of success as a veterinarian.)

Job/Date/Location/Description \_\_\_\_\_  
\_\_\_\_\_  
Job/Date/Location/Description \_\_\_\_\_  
\_\_\_\_\_

VI. References

References should be from two or three professional persons. One must be from a veterinarian. A reference from a DVMA member is suggested, but not required. (Please have references complete the DVMA Student Scholarship Reference Form provided.)

Name \_\_\_\_\_  
Title \_\_\_\_\_  
Address/phone \_\_\_\_\_

Name \_\_\_\_\_  
Title \_\_\_\_\_  
Address/phone \_\_\_\_\_

Name \_\_\_\_\_  
Title \_\_\_\_\_  
Address/phone \_\_\_\_\_

VII. Letter of interest

Please include a brief personal statement explaining your ties to the state of Delaware, special interests in veterinary medicine and future plans.

VIII. Veterinary School Transcript

Please provide official transcript from Veterinary School or College.

“I certify that the information provided is accurate to the best of my knowledge. I understand that this information is confidential and will be used only by the Delaware Veterinary Medical Association Scholarship Committee for the purpose of selecting a recipient.”

---

*Signature*

*Date*

***Application, transcripts, recommendations and personal statement must be postmarked on or before June 30, 2009. Mail to: DVMA Scholarship Committee, c/o Lynn Appel, 937 Monroe Terrace, Dover, DE 19904. Scholarship will be awarded no later than October 1, 2009.***