

The Early Acceptance Pathway

Spring 2024





The Early Acceptance Pathway

The *Early Acceptance Pathway* gives exceptionally well qualified applicants the opportunity to obtain admission to veterinary school after the completion of the sophomore year. With admission to the Cornell University College of Veterinary Medicine secured, the successful applicant may use the time between acceptance and matriculation to pursue experience in areas of personal interest. Applicants to this program apply and are accepted or denied upon completion of their sophomore year. Entry into the professional curriculum is expected after completion of the junior year. Admission to the pathway is based on outstanding academic performance in the first two years of college and the applicant's plan for their intended use of the third year in college. Completion of a baccalaureate degree prior to matriculation is not required.

Criteria for admission to this pathway are rigorous. Applicants for this pathway will have a GPA of 3.7 or better. Applicants must have also completed at least one semester of organic chemistry **and** one semester of an upper-level biology, biochemistry, or physics course. A grade of B or better is required for all prerequisite course work under this pathway.

In addition to presenting all required documentation under the Fall Admissions cycle (with the exception of the VMCAS), applicants must submit a written plan describing how the time between acceptance and matriculation will be used. Examples of how the time may be spent include study in challenging courses in areas of interest, initiation or completion of a research project, or time spent in a unique life experience. This pathway is not intended to delay matriculation for reasons of economics, illness, or other personal hardship.

The deadline for the Early Application and all supporting documents (official college transcripts and letters of evaluation) is **June 1, 2024**.



Early Acceptance Pathway Instructions

- Complete and sign the Early Acceptance Pathway Application; read and sign the Essential Skills and Abilities statement (VMCAS not required for this application).
- Email a copy of the application by June 1st. Application fee of \$65.00 can be mailed with the application or separately if the application is sent electronically. (Check or money order made payable to Cornell University.)
- Request transcripts from all colleges attended be sent via maul or electronically directly from the Registrar(s) Office to the DVM Admissions Office.
- If using AP Chemistry or Physics (score of 4 or higher) for the general chemistry and/or general physics prerequisite courses, have the College Board send official scores to College Code 4818.
- Email a copy of the evaluation form to your evaluators to complete and send in by the June 1st deadline. We require minimally 3 letters including one veterinarian, one college professor and one other. A maximum of 6 letters will be accepted. Links to the evaluations are found in the body of the application. Letters can be attached to the forms.
- If a New York Resident, complete the NY Residency Form and send in by the June 1st deadline.
- If an international applicant, please review and provide information found at the following link: https://www.vet.cornell.edu/education/doctor-veterinary-medicine/admissions/international-students
- The Dean's Certification is required of all admitted students by March 15, 2025. No need to send at the time of application.
- Deadline to submit the application, fee, and all the required documents is June 1st. If your college spring term has a late end date, please notify the Admissions Office at vet admissions@cornell.edu



If you are having trouble filling out the Early Acceptance Application, please download the free Adobe Acrobat Reader at: http://get.adobe.com/reader

DVM Admissions, Office of Student and Academic Services
Cornell University College of Veterinary Medicine
S2-009 Schurman Hall, Ithaca, NY 14853
Phone (607)253-3700; FAX (607)253-3709; vet admissions@cornell.edu

Application for Early Acceptance – Spring 2024

1.	Name in Full	:		
	Please state ar	ny other name which	may appear on docun	nents we will receive:
2.	Telephone Nu	ımber(s):		
3.	Email Addres	ss:		
4.	Current Add	ress:		
	Permanent A (if different fr			
5.	Date of Birth	:		
6.	Gender:	Male	Female	Prefer not to respond
7.	Are you a US	citizen?	Yes	No
	Place of I	Birth:		
	What is y	our US State of Lega	l Residence?	
	How long	g have you lived in th	is state?	
	When did	l your residency in th	is state begin?	
	Are you a	Canadian citizen?	Yes	No
	Citizensh	ip:		
	Non-citiz	en Status:		
	Visa type	:		
	Alien Reg	gistration Number:		
	Issued in:		On:	
8.	Are you the f	irst generation in yo	our family to attend	college?
			Voc	No

9. What is your Military Status?

On Active Duty Veteran

Member of Reserve or National Guard Military Dependent

Other Not a member of the military

Definitions

Active Duty: Currently serving on active duty in any branch of United States Armed Services.

National Guard: Currently serving in the National Guard of any United States military branch.

Reserve: Currently serving in the Reserves of any United States military branch.

Veteran: Have served in any military branch of the United States Armed Services, received

honorable discharge, and have not already selected any of the options above.

Military Dependent: A person who has a relationship to a military sponsor and is entitled to certain

benefits by virtue of that relationship. Certain family members, primarily a spouse, child, stepchild, or legally adopted child, are automatically entitled to

dependency status.

10. College Information

a. List in chronological order (most recent first) all colleges and universities you have attended. Under "GPA credits," do not count pass/fail or other credits which do not affect the GPA. An official transcript is required from each college attended to be sent to our office directly from each institution by the June 1st deadline.

Institution	Total Credits	GPA Credits	GPA	Dates of Attendance	Degree Received or Anticipated	Major
monution	Credits	Cicuits	SI/I		7 interputed	1714]01

b.	Did you graduat	e from Higl	h School?	Yes	No	
	High School Na	me:				
c.	Have you ever b	een dismiss	sed from,	placed on probation	at, or otherwise disc	ciplined by an
	educational insti	tution?		Yes	No	
	If yes, please ex	plain:				
d.	If you have a do	uble major/	minor, in	dicate the major/min	nor here and (if it is	not stated on your
	transcript) attach	n a letter fro	m your r	egistrar confirming t	his fact:	

- e. If you have an honors thesis or honors program, indicate here the honors thesis and/or program and (if it is not stated on your transcript) attach a letter from your registrar confirming this fact:
- f. If your college education was interrupted, briefly explain for how long and for what reason(s):
- g. List any awards or recognition you have received since high school for excellence in scholarship:

11. Prerequisite Courses

All required prerequisite courses must be completed by the end of spring term before matriculation with course titles similar to those listed below. If your course titles are different, submit a Prerequisite Substitution Form found on our website at: https://www.vet.cornell.edu/education/doctor-veterinary-medicine/admissions/requirements/prerequisite-courses

All prerequisite courses must be taken for a grade and for credit, not pass/fail, S/U or narrative. AP credit means "Advanced Placement," and the Admissions Committee intends for you to take an advanced course at a college for a grade in the same topic area with the exception of General Chemistry and Physics (score of 4 or higher). The advanced course cannot be another required course. All prerequisite courses must have a grade of B or better to be considered for the Early Acceptance Pathway.

➤ Prerequisite Courses:

- ➤ Full Year of English Composition or Writing Intensive Course
- Full Year of Biology with Labs
- > Full Year of Chemistry with Labs
- > Full Year of Physics with Labs
- > Semester (or two Quarters) of Organic Chemistry with Labs
- ➤ Biochemistry (4 credits or 6 quarter credits)
- Advanced Life Science (one semester or two quarters). See list of courses on our web site: https://www.vet.cornell.edu/education/doctor-veterinary-medicine/admissions/requirements/ prerequisite-courses

12	Letters	of Evaluation	and Recomn	nendation:
14.	Letters	OI Evaluation	and Necomin	ienuauon.

Please send the appropriate form to each of your evaluators or print a copy of the appropriate form (available in the Supplemental Forms section beginning on page 24) to send to your evaluators to complete and return to us by the June 1st deadline. Be sure to complete the Applicant portion of each from before sending to your evaluators.

a.	List of Academic Evaluation(s) to be Submitted:
	Cornell requires at least one evaluation from someone familiar with your academic performance.
	It is not necessary to include an academic evaluation from each institution attended

Name of Person or Committee	Position/Title	College

b. List of Animal/Veterinary/Biomedical Research Evaluation(s) to be Submitted:

Name of Evaluator	Company/Organization	Responsibilities	Total Hours
	Company/Organization	Responsionnes	110013

c. List of Employer/Non-Veterinary Evaluation(s) to be Submitted (optional): *This section is optional and is provided for those who wish to submit additional evaluations.*

Name of Evaluator	Company/Organization	Responsibilities

13. List all veterinary and animal experiences, either voluntary or paid, in chronological order (most recent first).

If you list an experience below more than once, do not duplicate the total hours worked/volunteered. (Example: Applicant worked a total of 500 hours; 300 with first date of experience; 200 with second date of experience; not 500 for both).

Name of Employing Practice/Firm/Organization #1	
Address	
Phone	
Work Setting	
Primary Species	
Secondary Species	
Total Hours Worked	
List your Duties and Responsibilities Estimate the percentage of time spent on each, e.g., taking vital stats (15%), prepare and administer medication (15%), drawing blood (15%), monitoring recovering patients (15%), running lab work (10%) animal restraint (30%) Dates Employed	
Supervisor's Name	
•	
Name of Employing Practice/Firm/Organization #2	
Address	
Phone	
Work Setting	
Primary Species	
Secondary Species	
Total Hours Worked	
List your Duties and Responsibilities Estimate the percentage of time spent on each, e.g., taking vital stats (15%), prepare and administer medication (15%), drawing blood (15%), monitoring recovering patients (15%), running lab work (10%) animal restraint (30%)	
Dates Employed	
Supervisor's Name	
Name of Employing Practice/Firm/Organization #3	
Address	
Phone	
Work Setting	
Primary Species	
Secondary Species	
Total Hours Worked	
List your Duties and Responsibilities Estimate the percentage of time spent on each, e.g., taking vital stats (15%), prepare and administer medication (15%), drawing blood (15%), monitoring recovering patients (15%), running lab work (10%) animal restraint (30%)	
Dates Employed	
Supervisor's Name	

Name of Employing Practice/Firm/Organization #4	
Address	
Phone	
Work Setting	
Primary Species	
Secondary Species	
Total Hours Worked	
List your Duties and Responsibilities Estimate the percentage of time spent on each, e.g., taking vital stats (15%), prepare and administer medication (15%), drawing blood (15%), monitoring recovering patients (15%), running lab work (10%) animal restraint (30%)	
Dates Employed	
Supervisor's Name	
Name of Employing Practice/Firm/Organization #5	
Address	
Phone	
Work Setting	
Primary Species	
Secondary Species	
Total Hours Worked	
List your Duties and Responsibilities Estimate the percentage of time spent on each, e.g., taking vital stats (15%), prepare and administer medication (15%), drawing blood (15%), monitoring recovering patients (15%), running lab work (10%) animal restraint (30%)	
Dates Employed	

Supervisor's Name

^{*}If you require more space to describe your experiences, please enclose a separate page*

14. Summary of Research and Teaching Experience

(Optional – DO NOT repeat experiences listed in Question 13.) Please list in chronological order (most recent first).

Name of Institution #1	
Dates	
Position	
List your Duties and Responsibilities Estimate the percentage of time spent on each duty or responsibility.	
Name of Institution #2	
Dates	
Position	
List your Duties and Responsibilities Estimate the percentage of time spent on each duty or responsibility.	
Name of Institution #3	
Dates	
Position	
List your Duties and Responsibilities Estimate the percentage of time spent on each duty or responsibility.	
Name of Institution #4	
Dates	
Position	
List your Duties and Responsibilities Estimate the percentage of time spent on each duty or responsibility.	
Name of Institution #5	
Dates	
Position	
List your Duties and Responsibilities Estimate the percentage of time spent on each duty or responsibility.	

^{*}If you require more space to describe your experiences, please enclose a separate page*

${\bf 15.\ Extracurricular/Co-curricular/Community\ Service\ Activities\ and\ Organizations.}$

Please list in chronological order (most recent first).

Name of Activity/Organization #1 Dates List your Duties and Responsibilities Estimate the percentage of time spent on each duty or responsibility. Name of Activity/Organization #2 Dates List your Duties and Responsibilities Estimate the percentage of time spent on each duty or responsibility. Name of Activity/Organization #3 Dates List your Duties and Responsibilities Estimate the percentage of time spent on each duty or responsibility. Name of Activity/Organization #4 Dates List your Duties and Responsibilities Estimate the percentage of time spent on each duty or responsibility. Name of Activity/Organization #4 Dates List your Duties and Responsibilities Estimate the percentage of time spent on each duty or responsibility. Name of Activity/Organization #5 Dates List your Duties and Responsibilities Estimate the percentage of time spent on each duty or responsibility. Name of Activity/Organization #6 Dates List your Duties and Responsibilities Estimate the percentage of time spent on each duty or responsibility. Name of Activity/Organization #6 Dates List your Duties and Responsibilities Estimate the percentage of time spent on each duty or responsibility.	Trease list in emonological order (most	i recent mist).
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Estimate the percentage of time spent on each	Dates	
	Estimate the percentage of time spent on each	

^{*}If you require more space to describe your experiences, please enclose a separate page*

16. Non-animal/Non-Veterinary Employment HistoryPlease list in chronological order (most recent first)

Please list in chronological order (mos	t recent mist).
Name of Activity/Organization #1	
Dates	
List your Duties and Responsibilities	
Estimate the percentage of time spent on each	
duty or responsibility.	
Name of Activity/Organization #2	
Dates	
List your Duties and Responsibilities	
Estimate the percentage of time spent on each	
duty or responsibility.	
Name of Activity/Organization #3	
Dates	
List your Duties and Responsibilities	
Estimate the percentage of time spent on each duty or responsibility.	
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Name of Activity/Organization #4	
Dates	
List your Duties and Responsibilities	
Estimate the percentage of time spent on each	
duty or responsibility.	
Name of Activity/Organization #5	
Dates	
List your Duties and Responsibilities	
Estimate the percentage of time spent on each	
duty or responsibility.	
Name of Activity/Organization #6	
Dates	
List your Duties and Responsibilities	
Estimate the percentage of time spent on each	
duty or responsibility.	
If you require more space to describe you	ur experiences, please enclose a separate page

17. Have you ever been fired or dismissed by an employer?

If yes, please include an explanation:

Yes

No

18. Personal Information (optional)

Collected primarily for statistical or informational purposes only.

a. Please check all items that apply to you:

I have published a scientific paper: Yes

If yes, title of paper and publication:

I am a licensed veterinary technician: Yes No

I attended medical or veterinary school for

at least one semester: Yes No

No

I have toured your Veterinary College Facilities: Yes No

If yes, what month/year?

I attended an admissions presentation: Yes No

If yes, what month/year?

If yes, where was the presentation given?

I subscribe to the Pre-Vet Newsletter:

b. Interests and Background

Currently I am most interested in this aspect of veterinary medicine: *Please select only one item below*

Biomedical Equine Government Industry

Lab Animal Mixed Production Public Health

Small Animal Zoo & Wildlife Undecided

Most of my life I have lived in an area which is:

Please select **only one** item below

Rural Suburban Urban More than one area

19. Personal Statement

Your personal statement is a one-page essay (not to exceed 550 words) that gives a clear picture of who you are and, most importantly, why you want to pursue a career in veterinary medicine. Please attach your essay on a separate page if it does not fit in the space provided.

Please explain your interest, passion, and understanding of the veterinary profession and why you would like to make this your career. This essay provides an opportunity to share a defining moment, how you will contribute to the profession and patient care, and your journey along the way to explain why you would be a good candidate for our program and the profession.

- Be authentic, original, and thoughtful.
- Include your passion for the profession, and consider your positive character traits, ideals, and aspirations.
- Avoid relisting all your experiences that will appear in other sections of the application, and understand structure and format are important in a well-written essay.

20. Short Essays

Please respond to each of the following questions in 200 words or less per question. These questions are intentionally open-ended with no right or wrong answers so that you can provide the admissions committee with more information about yourself. When giving examples, please choose those that best illustrate your point, regardless of whether they are from a veterinary setting. Please attach your answers on a separate page if they do not fit in the spaces provided.

A. Describe a situation in which your actions have had a significant impact.

B. Describe a situation where you have learned from experience.

C. Describe a situation where circumstances were against you and how you made it work for you.
Di. Describe a challenge or problem you have faced in the past, and how you reached a solution.
Dii. If you had to face this challenge again, would you do anything differently and why?
Dif. If you had to face this chancinge again, would you do anything differently and why:

21. Written Plan

Please include your written plan (not to exceed 600 words) describing how the time between acceptance and matriculation will be used. Examples of how the time may be spent include study in challenging courses in areas of interest, initiation or completion of a research project, or time spent in a unique life experience.

Your	legal	signature	below attests	to voui	r understanding	g and a	greement to th	e followir	g policies:
1000	$\iota\iota\iota_{S}$ $\iota\iota\iota$	Signature	octon micesis	io you	with the state of	,	Si centent to th		is policies.

1.	I realize that, if accepted to Cornell University College of Veterinary Medicine, I will be expected to
	abide by its rules and regulations including adherence to the Honor Code, which governs student
	conduct; and participate in curricular activities involving the use of live animals in laboratory and
	clinical settings where the faculty determine no alternative to live animals is appropriate.

- 2. New York State statute defines "residence" as the permanent or principal home for the 12-month period immediately prior to the date of expected enrollment, or, in the case of dependents (which we define as being claimed on your parents' federal income tax), the home of parents or guardians. I realize that once I have submitted my application, my residency status will not change.
- 3. I realize that, if accepted, I will be required to work closely with dogs, cats, horses, cows, and other animal species.
- 4. I realize that clinical training requires that I work long hours, nights, and weekends.

I certify that the information I have provided on the application and in any related material is true and complete and will notify the Cornell University College of Veterinary Medicine promptly if there is a change in any aspect of this application. I understand this is a continuing obligation throughout my enrollment at Cornell and that inaccurate, misleading, or incomplete statements or a failure to update any aspect of the application could result in honor code proceedings, dismissal, recission, or cancellation of my Veterinary Medical degree, or other disciplinary sanctions.

Legal Signature	Date



Statement of Essential Skills and Abilities Cornell College of Veterinary Medicine - DVM Degree

Introduction

The Doctor of Veterinary Medicine degree (or DVM) signifies that the holder is a veterinarian prepared for entry into the practice of veterinary medicine with or without further postgraduate study. All Cornell veterinary students must acquire broad scientific knowledge and technical skills necessary for them to function independently in a wide array of clinical, research, and other situations. Candidates for the DVM degree must demonstrate the requisite skills and abilities to satisfy both the overall and course-specific requirements of the curriculum. Moreover, students must be able to function safely and effectively in multiple environments such as classrooms, laboratories, examinations, large and small animal clinics, and a variety of animal environments. Exposure to chemicals (e.g., medications, disinfectants, anesthetics, tissue fixatives) and pathogens are unavoidable during veterinary school and beyond.

Veterinarians are governed by a code of ethics and professional behavior that forms a social contract between the profession and society. The DVM degree is conferred only after the student has achieved satisfactory mastery of the necessary scientific and clinical knowledge as well as technical skills, while also demonstrating the professionalism, attitudes, and behaviors that are consistent with the professional degree of veterinarian. Throughout the curriculum, students must demonstrate a high level of compassion for all animals and people, excellent interpersonal and communication skills, the highest moral and ethical standards, and a motivation to serve, and they are expected to interact effectively with people of all ethnic, social, cultural, and religious backgrounds.

Essential Requirements

The following information will familiarize applicants and students with the abilities, skills, and attitudes expected to meet the requirements of the curriculum and the profession. The avowed intention of an individual student to practice only a narrow part of clinical medicine, or to pursue a non-clinical career, does not alter the requirement that all veterinary students take and achieve competence in the curriculum required by faculty.

The College of Veterinary Medicine at Cornell University has an ethical responsibility for the safety of patients and clients with whom students and veterinarians interact and interrelate. Patient and client safety and well-being are therefore essential factors in establishing requirements involving the physical, cognitive, and emotional abilities of candidates for admission, promotion, and graduation. Candidates for the DVM degree must be able to elicit and receive a variety of inputs from their environment, including tactile, visual, and auditory stimuli, then process these inputs based on their knowledge and experience, and finally make appropriate responses that include both verbal communications and a variety of physical actions. A candidate for the DVM degree must demonstrate abilities and skills in five areas: observation, communication, motor, intellectual (conceptual, integrative, and quantitative), behavioral, and social.

- I. <u>Observation:</u> The candidate must be able to observe and make assessments from required demonstrations and experiments, including but not limited to anatomic dissection, microscopic analyses, animal/patient demonstrations, and radiographic and other graphic and diagnostic images. A candidate must be able to observe a patient accurately at a distance and close at hand and assess findings. S/he must perceive and interpret signs of fear, aggression, and other potentially dangerous behaviors exhibited by various animal species. Observation requires the functional use of vision, hearing, and somatosensation, often in complex situations in veterinary health care environments.
- II. <u>Communication:</u> A candidate must be able to elicit information, establish rapport, offer explanations, and to describe changes in behavior, activity, and posture. Communication includes not only speech, but also interpretation of nonverbal cues, and reading and writing in English. The candidate must be able to communicate effectively, efficiently, and in a timely manner with all members of the health care team.
- III. Motor Function: A candidate must have sufficient motor skills to use scientific and diagnostic instrumentation, to carry out animal restraint and essential diagnostic procedures, including palpation, auscultation, percussion, and other components of a physical exam on live animals, to perform surgical manipulations, and to conduct dissection and necropsy on cadavers. A candidate must be able to execute motor movements reasonably required to provide general care, surgery, and emergency treatment to patients of all species. In addition, the candidate must be able to escape physically dangerous contacts with animal patients. Such actions require coordination of both gross and fine muscular movements, equilibrium and functional use of the senses of touch, vision, and hearing.
- IV. <u>Intellectual (Conceptual, Integrative, and Quantitative):</u> Problem solving, a critical skill of veterinarians, requires that a candidate be able to obtain, retrieve, analyze, integrate and synthesize information from multiple sources efficiently and accurately. In addition, a candidate should possess the ability to measure and calculate accurately, to perceive three-dimensional relationships, and to understand the spatial relationships of structures. Candidates must be able to formulate and test hypotheses that enable effective and timely problem-solving in the diagnosis and treatment of patients in a variety of clinical situations. In many cases, these decisions and appropriate diagnostic and therapeutic maneuvers are time-sensitive. Thus, candidates must demonstrate the skills, knowledge, and abilities to process multiple situations simultaneously.
- V. <u>Behavioral and Social Attributes:</u> A candidate must be able to fully utilize his or her intellectual abilities, exercise good judgment, promptly complete all responsibilities attendant to the diagnosis and care of patients, and to develop effective relationships with their companions, peers, staff, colleagues, and with clients. S/he must be able to work effectively as a member of a health-care team, and must be able to tolerate physically and emotionally taxing workloads, to function effectively under stress, and to display flexibility and functionality in the face of uncertainties inherent in assessing patients' health problems. Candidates need to be able to both elicit and convey information to clients and staff in a timely and effective manner, using both oral and written formats. S/he must understand the legal and ethical aspects of the practice of veterinary medicine, and function within both the law and the ethical standards of the veterinary profession. The candidate is expected to demonstrate a high commitment to professional behavior that includes, but is not limited

to, demonstration of competence, compassion, integrity, lifelong learning, concern for others, interpersonal skills, collegiality, interest, and promotion of the public good.

These personal qualities, abilities, and skills will be assessed during the admission process and throughout the educational program. In addition, applicants and enrolled veterinary medical students must be able to perform the duties of a veterinary student without endangering the lives of patients, caretakers, colleagues and staff, or themselves. In order to complete required courses, students are expected, at a minimum, to work with dogs, cats, horses, and cows. Other species are commonly seen (e.g., rabbits, warm- and cold-blooded small and exotic pet species, llamas and alpacas, etc.).

<u>For (</u>	<u>Comp</u>	<u>letion</u>	<u>by</u>	All	<u>Candidates:</u>

Signature

I certify that I have read and fully understand that all students are required to meet the requirements for t					
Cornell DVM program as set forth in this Statement of Essential Skills and Abilities.					
. 0					
Print Full Name					

Date



Early Admission Application Checklist:

Please note you will not be able to modify your application once it has been submitted.

I have included my written plan describing how the time between acceptance and matriculation will be used.
I have had official AP scores sent (only if using Chemistry or Physics AP for prerequisite courses); AP College Code 4818.
If English is not your first language, have you taken and submitted the TOEFL (college code 1510)?
I have requested a letter of evaluation from a veterinarian, college professor or advisor and one other person.
I have had at least one evaluation sent from someone familiar with my academic performance.
I have had official college transcripts sent directly to your office from each college or university I have attended with the full four semesters of college work completed (including this spring term).
If you are a New York resident, have you completed the NY Residency Form (available in the Supplemental Forms section beginning on page 24)?
I have emailed a copy of this completed Application, signed the Legal Signature Page, and the Essential Skills Statement by June 1st to vet_admissions@cornell.edu .
I have sent a check made payable to "Cornell University" (\$65) to the address below.
Reminder the deadline for submitting the Early Application, application fee, evaluations, and transcripts is June 1 . If your college Spring term has a late end date please notify the Admissions Office at vet admissions@cornell.edu.



The Early Acceptance Pathway Spring 2024

Supplemental Forms

The following forms are supplemental to the application pages above. Please complete the Applicant section of each evaluation and save each form separately to send to your evaluators.

New York State Residency Worksheet	p. 25-27
Evaluation of Academic Performance	p. 28-29
Evaluation of Animal/Veterinary/Biomedical Research Experience	p. 30-31
Evaluation of Non-Veterinary Experience	p. 32-33

DVM Admissions - New York State Residency Worksheet

you sta loc and	apply as a New York resident, you must complete this form. All other students will be insidered "at-large" or non-resident applicants. Since your state residency often affects our admission, we have developed this worksheet to help you understand the details of ite residency. State residency for admissions/tuition purposes is defined mostly by the ration of your permanent home. You could go to school or even work outside New York distill be considered a New York resident. Deadline: June 1, 2024 The following will help you confirm your residency: Name:
	Permanent Address:
	Email Address:
	Complete this form <u>only</u> if you are claiming residency in New York. Please complete the section(s) that apply to you.
2.	You may be a resident of only one state at one time. I am a: New York Resident & US Citizen New York Resident & US Permanent Resident
Se	ection One: All New York applicants should complete this section.
3.	In which year will you submit your application?
	Note: Do not list year of enrollment. The application process is one full year before enrollment begins.
4.	Will anyone, including yourself, claim you as a dependent on his or her federal income tax (1040) forms during the tax year indicated in #3? Yes No If yes, who is claiming you?
	In which state are they filing federal income tax forms?
5.	Will you file state income tax forms for the year listed under #3 in the state you are claiming residency? Yes No
	If yes, in which state are you filing state tax forms?

Note: New York Residents who owe no state income tax should still file state tax forms.

	erify answers to any of questions 6 ated in #3 above.	5 – 15. Documents need to be dated by August 1 of the year you
6.	Are you registered to vote? (Perr	manent residents skip this question)
	Yes	No
	If yes, in which state are you regi	stered to vote?
7.	Do you have a driver's license?	
	Yes	No
	If yes, which state?	
8.	Do you possess a car or truck?	
	Yes	No
	If yes, in which state is it register	ed?
		an NYS for questions 6-8 you may not be considered a NYS I have any of the above, they are NYS affiliated by August 1 of the
9.	If you are claimed as a dependent relative's name and relationship	t on federal tax forms of a relative living in New York, list that here:
10.	If you are not a dependent of a N York in your name for the year in Yes	lew York resident, do you have a lease or utility bill in New #3? No
	• •	relative in New York, are not their dependent, and do not share attach a letter from that relative stating that your permanent the entire year stated in #3.
	Relative's Name:	
11.	If you are not a dependent, list h tax forms as a non-dependent:	ere the first and all consecutive years you filed New York income
12.	I am in the U.S. Military	
	Yes	No
	If you checked Yes above, are yo Yes	u registered in any branch as a New York resident? No
13.	Are you listing on your application Yes	on for admission a <i>permanent</i> street address within New York? No
	Note: P. O. Box and dorm addres.	ses are not sufficient for New York residency.

Section Two: NY residents should complete this section. If Cornell were to question your residency (we randomly audit NY residents), we would require you to submit documentation to

Se	ection Three: US Permanent Resi	dents residing in New York should also complete this section.	
14.	Was your green card issued prio	r to August 1 of the year in #3?	
	Yes	No	
15.	Does the INS officially record a N	lew York addressfor you?	
	Yes	No	
16.	You must attach a photocopy of	your green card and INS documentation of your New York	
	address. Are you doing so?	,	
	Yes	No	
	Note: This form contains informa	tion for the Admissions Office to determine your state status.	
	They may contact you if there ar	e questions about the answers on this form.	
Se	ection Four: All applicants claiming	ng New York residency must sign below:	
	I realize that I can be a resident of only one state at one time. I am not applying to any other institution as a resident of any state other than the one declared above. I certify I have answered all applicable questions above completely, truthfully, and accurately. I realize any falsifications could result in Cornell's withdrawal of an offer of admission, immediate dismissal, or punishment under the Cornell DVM Honor Code.		
	Applicant's Signature:	Date:	
	Please email as an attach	ment, fax or send this form to the DVM Admissions Office. (contact information below)	



Evaluation of Academic Performance

Note to Evaluator

Please complete this form and email, FAX or send via mail directly to the DVM Admissions Office. We follow deadlines <u>closely</u>, so please make sure your evaluation is submitted by June 1st.

For Applicant and Evaluator

Action on this application by the Admissions Committee will be based on an evaluation of the applicant's capacity for intensive professional graduate study and his or her potential for professional success. To encourage the evaluator to provide the college with a candid evaluation, denied applicants will not have access to this evaluation. The comments below will be reviewed only by those involved with admissions. You are also welcome to attach a letter.

Applicant should complete this section

Today's Date

Applicant's Full Name

Email Address on Your Application

Permanent/Home Telephone Number on Your Application

Applicant: In accordance with the Family Educational Rights and Privacy Act of 1974, you can waive your right to inspect this evaluation by checking the box below. Should you decide *not* to waive the right, you will have access to the evaluation only if you enroll in the DVM or Combined DVM/PhD Degree Program at Cornell University.

I hereby waive my right of access to this evaluation

Evaluator should complete this section

Please type or print and attach additional sheets if necessary.

Your (Evaluator's) Full Name

Title or Occupation

Institution

Mailing Address

Telephone and Email Address

Evaluation				
1. How much cont	act have you	had with the applican	nt?	
We have s	poken:	Frequently	Occasionally	Rarely
The applic	cant has:	Worked for me	Attended my cour	rse(s)
2. In what capacity	have you kn	own the applicant? (e	.g. regularly assigned adv	visor, teacher, etc.)
3. Do you have an	y reason to d	oubt the applicant's h	onesty or integrity?	
No	Yes	(If yes, explain.)		
4. Evaluate the app leadership abilition			poise, conscientiousness	, reliability, and
5. In your opinion,	, is the applic	ant's scholastic record	d an accurate index of his	s or her academic ability?
Yes	No	I Don't K	now	
If your an	swer is "no"	please explain briefly.		
course seems to		•	at did the applicant's pringer grade meet requ	•
7. Discuss the appl	licant's abiliti	es for teaching or reso	earch.	
8. Discuss the appl	licant's ability	to study/carry out a	cademic projects indeper	ndently.
9. What are the app	plicant's weal	knesses?		
10. The Admission to provide regard			sted in any additional info	ormation you may wish
11. Of the pre-pro	fessional stud	lents you have advise	d, how would you rank t	his candidate?

Signature Date

top 1/3

top 1/10

Thank you for taking the time to help the Admissions Committee in evaluating applicants to the College of Veterinary Medicine at Cornell. Your evaluation is an important part of our overall admissions process and we appreciate your assistance and advice.

bottom 1/3

unable to judge

middle 1/3



Evaluation of Animal/Veterinary/Biomedical Research Experience

Note to Evaluator

Please complete this form and email, FAX or send via mail directly to the DVM Admissions Office. We follow deadlines <u>closely</u>, so please make sure your evaluation is submitted by June 1st.

For Applicant and Evaluator

Action on this application by the Admissions Committee will be based on an evaluation of the applicant's capacity for intensive professional graduate study and his or her potential for professional success. To encourage the evaluator to provide the college with a candid evaluation, denied applicants will not have access to this evaluation. The comments below will be reviewed only by those involved with admissions. You are also welcome to attach a letter.

Applicant should complete this section

Today's Date

Applicant's Full Name

Email Address on Your Application

Permanent/Home Telephone Number on Your Application

Applicant: In accordance with the Family Educational Rights and Privacy Act of 1974, you can waive your right to inspect this evaluation by checking the box below. Should you decide *not* to waive the right, you will have access to the evaluation only if you enroll in the DVM or Combined DVM/PhD Degree Program at Cornell University.

I hereby waive my right of access to this evaluation

Evaluator should complete this section

Please type or print and attach additional sheets if necessary.

Your (Evaluator's) Full Name

Title or Occupation

Institution

Mailing Address

Telephone and Email Address

Evaluation

- 1. What was the applicant's title or position while employed by your firm or organization?
- 2. What was your supervisory relationship to the applicant?
- 3. In the past five years, I have evaluated approximately candidates for admission to veterinary medical colleges.
- 4a.) Please estimate the total number of hours the applicant worked with your firm or organization.
- b.) Please estimate the total number of hours the applicant worked directly with you.
- 5. Rate the applicant from 1-10 on each of the qualities listed below. Compare this applicant to other preveterinary or veterinary students you have known in making your rating:

1= bottom 5%; 7-9 = excellent/next 20%;

2-3 = fair/next 30%; **10** = outstanding/top 5%.

4-6 = satisfactory/next 40%;

Please think of your ratings as an evaluation, not as a recommendation.

enthusiasm	dependability	ability to work independently
motivation	use of common sense	ability to work with fellow employees
honesty	ability to handle animals	effectiveness in dealing with supervisor
stamina	sharing ideas	effectiveness in dealing with the public

- 6. Please use the space provided below and other pages as needed. Because all people have strengths and weaknesses, we want to hear about all relevant strengths and weaknesses of this applicant. We thank you for taking the time to help us select our next class. Please feel free to attach a separate page.
- 7. Please check one of the following boxes to indicate the degree of your overall evaluation of the applicant based on his or her performance of duties and responsibilities.

strongly recommend recommend recommend with reservations do not recommend

Signature Date

Thank you for taking the time to help the Admissions Committee in evaluating applicants to the College of Veterinary Medicine at Cornell. Your evaluation is an important part of our overall admissions process and we appreciate your assistance and advice.



Evaluation of Non-Veterinary Experience

Note to Evaluator

Please complete this form and email, FAX or send via mail directly to the DVM Admissions Office. We follow deadlines <u>closely</u>, so please make sure your evaluation is submitted by June 1st.

For Applicant and Evaluator

Action on this application by the Admissions Committee will be based on an evaluation of the applicant's capacity for intensive professional graduate study and his or her potential for professional success. To encourage the evaluator to provide the college with a candid evaluation, denied applicants will not have access to this evaluation. The comments below will be reviewed only by those involved with admissions. You are also welcome to attach a letter.

Applicant should complete this section

Today's Date

Applicant's Full Name

Email Address on Your Application

Permanent/Home Telephone Number on Your Application

Applicant: In accordance with the Family Educational Rights and Privacy Act of 1974, you can waive your right to inspect this evaluation by checking the box below. Should you decide *not* to waive the right, you will have access to the evaluation only if you enroll in the DVM or Combined DVM/PhD Degree Program at Cornell University.

I hereby waive my right of access to this evaluation

Evaluator should complete this section

Please type or print and attach additional sheets if necessary.

Your (Evaluator's) Full Name

Title or Occupation

Institution

Mailing Address

Telephone and Email Address

_	. •		
HIVA	luatio	n	

1.	How	long have	you known	the apr	olicant?

- 2. In what capacity have you known the applicant? Please be specific
- 3. Rate the applicant from 1-10 on each of the qualities listed below. Compare this applicant to other employees you have known in making your rating:

1 = bottom 5%; 7-9 = excellent/next 20%; 2-3 = fair/next 30%; 10 = outstanding/top 5%

4-6 = satisfactory/next 40%;

Please think of your ratings as an evaluation, not as a recommendation.

honesty maturity ability to relate to people

initiative motivation responsibility
leadership perseverance self-confidence

enthusiasm

4. Evaluation ~ Please use the space provided below and *other pages as needed*. Inclusion of specific instances where the above characteristics were demonstrated are especially helpful. If there are any weaknesses, please inform us. Indicate any reservations you may have about the applicant's abilities.

Signature Date

Thank you for taking the time to help the Admissions Committee in evaluating applicants to the College of Veterinary Medicine at Cornell. Your evaluation is an important part of our overall admissions process and we appreciate your assistance and advice.