

APPLICATION: VETERINARY TECHNOLOGY PROGRAM

Candidate Form Due: March 15th

Name		Social Security #		OR
Address:	WCC ID			
City, State, Zip:				
Primary Phone: ()	Cell or home?			
Required information. Please provide	the information of	on the approp	riate line for pric	or courses taken.
COURSE INFORMATION:	Grade	Currently Enrolled	Not Taken Yet	Transfer Credit*
Prerequisite Requirements:				
Biological Science Biol 103 or equiv.				
Principles of Inorganic Chemistry Chem 113 or equiv.				
Other SCIENCE COURSE(S)				
Designate				
Writing and Research Eng 101 or equiv.				
Mathematics				
Math 130 or equiv. algebra				
Program Requirements:				
Writing and Literature				
Eng 102 or equiv.				
GENERAL PSYCHOLOGY				
PSCY 101 or equiv.				
*TRANSER CREDITS				
Do you have previous college credits for evaluation?			Yes	No
Did you obtain a degree from a previous institution(s)?			Yes	No
Have you submitted an official transcr	ipt for your previ	ous credits?	Yes ——	No
Print Name	Candidate's Sig	gnature		Date
Please address questions to: Dr. Godi	n: VetTech@supv	wcc edu		
ricuse dudiess questions to. Dr. Godi	ii, <u>veciecii@suiiy</u>	vvcc.euu		

Mail completed form to: WCC- Veterinary Technology Program

Room 16 Health Science Building 75 Grasslands Rd. Valhalla, NY 10595