South Dakota Veterinary Medical Association Foundation 4th Year Veterinary College Scholarship Application

Na	ıme	Date	
Cu	Current Address		
Те	lephone	Signature	
Re	quirements:	 Enrolled in an accredited College of Veterinary Medicine Must have been a SOUTH DAKOTA RESIDENT at the time you entered Vet College Show proof of completion of prior years of study by sending a copy of your transcript. (official transcript not required) 	
		the following questions and return the form to Janice Kampmann at SDVMA, Box 2175, SDSU, 57007 by June 15 along with a transcript. Attach additional sheets if needed.	
		award will be by mail, and the funds will be dispersed directly to the student. If you have questions, VMA (phone- 605-688-6649, fax- 605-688-6003, or e-mail- Janice.Kampmann@sdstate.edu)	
1.	Permanen	at address and legal residency when you first entered veterinary college:	
2.		escribe your background, including previous animal-related experiences and experiences rinary medicine.	
3.	Why did y	you choose the profession of veterinary medicine?	
4.	What do y	you plan to do upon graduation?	
5.	What drea	ams/goals do you have for your career, community, and family?	