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| Davis-Michael Pre-veterinary Scholarship Application for Continuing/Transfer Students | Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**WVUID#**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

## Contact Information

|  |  |
| --- | --- |
| Name |  |
| Street Address |  |
| City ST ZIP Code |  |
| Cell Phone |  |
| Mix E-Mail  |  |

## Current Academic Information:

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| \_\_\_\_\_\_\_\_\_ Cumulative GPA as of January 1\_\_\_\_\_\_\_\_\_ Hours Completed as of January 1\_\_\_\_\_\_\_\_\_ Current Hours |
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## Primary Volunteer Interests:

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## Long term goals:

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## Agreement and Signature: By submitting this application, I affirm that the facts set forth in it are true and complete. If I am awarded a scholarship, I understand that I may be expected to volunteer to help with activities of the Davis-Michael Program.

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| Signature:  |  |
| Return completed form by February 15, each year to Davis-Michael Scholars Program: **davismichael@mail.wvu.edu**or 2104 AGRICULTURAL SCIENCES BUILDING, PO BOX 6108, MORGANTOWN WV 26506-6108 **Please Note: Save application to be sent as:** **Lastname firstname, example: Stark Tony or Lincoln Abraham** |  |

## Comments: