



School of Allied Health Sciences
LINCOLN MEMORIAL UNIVERSITY

Veterinary Medical Technology
Associate of Science Degree Program Application

Semester and year of desired entrance into program: _____

Name: _____
Last Middle First

Date of birth: _____
Month Day Year

Permanent address: _____
Number & Street City State Zip

Phone numbers: _____
Home Mobile Work

Current email address: _____

Person to notify in case of an emergency: _____

Relationship: _____ Phone number: _____

Have you completed an A.S., A.A., B.S., or B.A. degree from LMU or another accredited institution?
(Please Circle) YES NO

If yes, please complete following section:

Institution City and State Type of degree Date of completion

Have you ever pled nolo contendere (no contest) or been convicted of either a felony or a misdemeanor, other than a minor traffic violation? (Please circle) YES NO

If yes, please provide written, detailed explanation in a separate document

Were you ever the recipient of any action (e.g. dismissal, disqualification, suspension, etc.) by any school for unacceptable academic performance or conduct violations? (Please circle) YES NO

If yes, please provide written, detailed explanation in a separate document

Note: Some states may require a background check and have other restrictions on credentialing. Admission into the VMT program LMU in no way guarantees you will receive credentials from a particular state. Contact the state veterinary boards for credentialing guidelines in the state of your choice.



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Signature

With your signature, you verify that the information contained in this application is complete and accurate.

Date of Submission

*At LMU, there is a rolling admissions policy. In order to be considered for admissions to the AS VMT program, applications must be submitted as early as possible. Acceptance of applications for fall begins on **January 1** of each year. A checklist is attached for all items that need to be submitted for consideration. All new cohorts begin in the **Fall semester** each academic year.*

FINAL ACCEPTANCE OF ADMISSION INTO THE VETERINARY MEDICAL TECHNOLOGY PROGRAM IS CONTINGENT UPON ACCEPTANCE TO LINCOLN MEMORIAL UNIVERSITY

Application may be mailed or hand delivered to:

**Lincoln Memorial University
Veterinary Medical Technology Program
6965 Cumberland Gap Parkway
Schenck Center for Health Sciences
Harrogate, TN 37752
Attn: Holly Evans**

Departmental Use Only

Date Received: _____

Accepted/Denied: _____

VMT Admissions Personnel: _____