## Virginia Veterinary Medical Association and the Virginia Association of Licensed Veterinary Technicians Student Scholarship

The Virginia Veterinary Medical Association and the Virginia Association of Licensed Veterinary Technicians are pleased to announce a scholarship opportunity for a veterinary technician student. This scholarship will be awarded to an individual who has demonstrated leadership skills as a student and has maintained high academic achievements while enrolled in the veterinary technology program. The scholarship will consist of a \$500 monetary award.

It would also be required that the recipient of the scholarship arrive on time to attend the VVMA annual meeting on the Friday of the Winter Conference in order to accept the scholarship.

## **Eligibility Requirements:**

- Candidates must be a currently enrolled student of an American Veterinary Medical Association (AVMA) accredited Veterinary Technology Program and be a student member of VALVT
- Candidate must have completed one full year.
- Candidate's grades must be above average
- Candidates should be strongly considering employment in Virginia
- Candidate must have a recommendation from his/her faculty advisor or staff member
- Candidates must submit the following:
  - Application, signed and dated
  - o Typed essay about their academic and leadership experience while enrolled in program
  - o Recommendation from faculty advisor or staff member
  - o Current school transcript

All completed application and submissions must be received electronically to the VALVT, by December 31st. Please submit to VALVTinc@gmail.com .

Checks will be made payable to the designated school by the Va. Veterinary Medical Association/VALVT

## Virginia Veterinary Medical Association/Virginia Association of Licensed Veterinary Technicians

## Scholarship Application

Ple	ase print or type				
1.	Name				
	Last	First	Middle		
2.	Current Address				
3.	Telephone				
4.	Permanent Address				
5.	 E-mail				
		rrently Attending			
7.	Dates of Attendance				
8.	Anticipated Date of Graduation				
9.	Cumulative GPA*	Please enclose current transcript*			
10		nts:			
11	. Verification (To be signed by a fac	erification (To be signed by a faculty advisor to the student)  n signing this form, I verify that the above applicant is a student in good academic standing at this institution.			
	Signature	phone			
	. On a separate sheet of paper, wri ile enrolled in program.	te at least a one page essay to inclu	de your academic and leadership	experience	
	I certify that I have truthfully and accurately answered the above questions to the best of my knowledge and belief, and that I understand any false or concealed information will be grounds for rejection of my application or subsequent termination of my scholarship. Furthermore, I hereby authorize the awards committee of the VALVT/VVMA to communicate with the college as necessary in regard to my application. If additional information or documentation is required of me, I will provide it. If selected as a scholarship recipient, I grant the VALVT/VVMA permission to use my name and/or photograph in press releases and/or other publicity.				
	Signature	Date_			

VALVTinc@gmail.com