

# Veterinary Scholarship Trust of New England

## Four Legs or Two Scholarship Information

Page 1 of 7

To apply for this scholarship, the student must submit:

- General VSTONE Scholarship Application (included here),
- Two references, one from a faculty member of their current veterinary school, Internship or residency program and one from a New England veterinarian in private practice (forms included here),
- Official Transcripts from all completed veterinary school semesters and proof of acceptance into an accredited or recognized equine veterinary program residency or proof of good standing in internship /residency program if appropriate.
- Essay, "How I will impact the quality of equine veterinary medicine in New England." Essays should be typed and 500-1000 words.

Completed applications, with transcripts, references, and essay, should be mailed to:

**Veterinary Scholarship Trust of New England**  
**P.O. Box 3221,**  
**North Attleboro, MA 02761**

They must be received by December 1 of the year prior to that in which scholarship funds are being requested (ie, deadline is December 1, 2017, for 2018 scholarship awards).

# Veterinary Scholarship Trust of New England Four Legs or Two Scholarship

Page 2 of 7

Date: \_\_\_\_\_

## **Applicant**

Full Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Place of Birth: \_\_\_\_\_

Social Security #: \_\_\_\_ - \_\_\_\_ - \_\_\_\_ Email: \_\_\_\_\_  
Please include a second e-mail address if primary one will not be valid after graduation  
Email: \_\_\_\_\_

## **Phone Numbers**

Cell \_\_\_\_\_ Permanent \_\_\_\_\_ Present Home \_\_\_\_\_

## **Address**

Present: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Permanent (if different): \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Years at Permanent Address: \_\_\_\_\_

New England State of Residence: \_\_\_\_\_

# Veterinary Scholarship Trust of New England Four Legs or Two Scholarship Application

Page 3 of 7

## **Education**

Veterinary Equine Internship or Residency Program: \_\_\_\_\_

Years completed: \_\_\_\_\_ Month/Year of expected graduation: \_\_\_\_\_

Veterinary College: \_\_\_\_\_

Years completed: \_\_\_\_\_ Month/Year of graduation: \_\_\_\_\_

Undergraduate: \_\_\_\_\_ Year graduated: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

High School: \_\_\_\_\_ Year graduated: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

If you did not graduate from a New England high school, please attach a list of your home (legal residence) addresses for the five years preceding matriculation into veterinary school; only students with five years residence apart from college will be considered.

The information on this application is correct to the best of my knowledge.

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Notary Public

\_\_\_\_\_  
Date

# Veterinary Scholarship Trust of New England Four Legs or Two Scholarship

Page 4 of 7

# Veterinary Scholarship Trust of New England Four Legs or Two Scholarship Application

Page 5 of 7

## Reference Form

Each Four Legs or Two Scholarship applicant needs to submit two reference forms. One form must be completed by a faculty member at the student's current veterinary school, internship or residency program. The second must be completed by a veterinarian currently in private practice or industry in New England. Four Legs or Two Scholarship recipients are chosen by merit. The student's academic performance and demonstration of a strong desire to improve the quality of equine veterinary medicine in New England will be considered.

Applicant: \_\_\_\_\_ Resident of NE State: \_\_\_\_\_

Veterinary School/Program: \_\_\_\_\_  
Anticipated graduation in: 20 \_\_\_\_\_

- Faculty of Veterinary School Internship or Residency Program**
- Private Practice or Industry**

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_  
\_\_\_\_\_

Work Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Please answer the following questions, continuing on the back if necessary.

1. How long have you known the applicant?
2. In what capacity have you known the applicant?
3. How will this student's strengths benefit equine veterinary medicine in New England?

# Veterinary Scholarship Trust of New England

## Four Legs or Two Scholarship

Page 6 of 7

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

### Reference Form

Each Four Legs or Two Scholarship applicant needs to submit two reference forms. One form must be completed by a faculty member at the student's current veterinary school, internship or residency program. The second must be completed by a veterinarian currently in private practice or industry in New England. Four Legs or Two Scholarship recipients are chosen by merit. The student's academic performance and demonstration of a strong desire to improve the quality of equine veterinary medicine in New England will be considered.

Applicant: \_\_\_\_\_ Resident of NE State: \_\_\_\_\_

Veterinary School/Program: \_\_\_\_\_  
Anticipated graduation in: 20 \_\_\_\_\_

- Faculty of Veterinary School, Internship or Residency Program**
- Private Practice or Industry**

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_  
\_\_\_\_\_

Work Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Please answer the following questions, continuing on the back if necessary.

4. How long have you known the applicant?

# Veterinary Scholarship Trust of New England Four Legs or Two Scholarship Application

Page 7 of 7

5. In what capacity have you known the applicant?
6. How will this student's strengths benefit equine veterinary medicine in New England?

---

Signature

---

Date