

**MISSISSIPPI STATE UNIVERSITY
COLLEGE OF VETERINARY MEDICINE
Veterinary Medical Technology Program
Application to the Junior Year
Confidential Evaluation**

Applicant _____

Evaluator _____ Telephone _____

TO THE EVALUATOR: Thank you for agreeing to submit this confidential evaluation. The applicant has requested that you evaluate him/her as a part of his/her application to the junior year of the Veterinary Medical Technology Program (VMTP) of the College of Veterinary Medicine (CVM). The information you provide is confidential and will be used only in the VMTP's application process. You might be telephoned by a member of the VMTP Admissions Committee seeking additional information or verification. To help the CVM comply with federal and state legislation prohibiting discrimination on the basis of disability, please refrain from mentioning any physical or mental disability the applicant might have. **Your assessments should be based on personal qualities believed relevant to the individual's performance and development in the VETERINARY MEDICAL TECHNOLOGY curriculum. If you believe yourself to be an inaccurate judge of the applicant's abilities, please do not complete the evaluation and ask the applicant to seek another evaluator.**

What is your occupation/profession/position? _____

How long have you known the applicant? _____

What has been your association with the applicant? _____

Do you have firsthand knowledge of the applicant's ABILITY TO HANDLE ANIMALS? (Answering "NO" to this question does not disqualify your evaluation. (The applicant is required to have only one confidential evaluation from a veterinarian/scientist to attest to the applicant's animal handling skills.)

YES NO

If yes, please indicate your appraisal of the applicant's ability to handle animals based on a 1 – 10 scale. (1 = lowest; 10 = highest; N = cannot evaluate)

_____ **APPLICANT'S ABILITY TO HANDLE ANIMALS**

Us the same 1-10 scale to respond to the inquiries below.

_____ **ATTITUDE TOWARD OTHERS** (cooperative, accepting of authority, congenial)

_____ **CHARACTER** (integrity, honesty, responsibility, habits, ethics)

_____ **INDUSTRY** (promptness, perseverance, reliability, independence)

_____ **MATURITY** (stable, accepts criticism, uses common sense)

_____ **MOTIVATION** (desire to succeed, initiative, commitment)

_____ **UNDERSTANDING OF DEDICATION** (necessary to succeed in a challenging undergraduate curriculum)

_____ **UNDERSTANDING OF THE VETERINARY PROFESSION** (Is the applicant knowledgeable about the role of veterinary profession and does he/she have a basic understanding of what he/she is getting into?)

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The VMTP demands dedication and significant effort from the admitted students. If an applicant is granted admission status, he/she will have specific requirements to meet in order to remain in good standing. Based upon your appraisals, which of the following best indicates your overall evaluation of the applicant? (Please circle one.)

Strongly Recommend

Recommend

Recommend with Reservations

Do Not Recommend

Please include additional comments or attach a separate letter to reinforce your above choice.

Signature

Your signature verifies that the information contained in this Confidential Evaluation is complete and accurate.

Date of Completion

PLEASE MAIL THIS COMPLETED CONFIDENTIAL EVALUATION TO:

**Veterinary Medical Technology Program
Mississippi State University
College of Veterinary Medicine
Mrs. Karen Cook, R1011
P. O. Box 6100
Mississippi State, MS 39762-6100**