



APPLICATION INSTRUCTIONS & DOCUMENTATION

Veterinarians and current veterinary students who have completed a minimum of 10 credit hours at a college of veterinary medicine, are eligible to apply to Chi University's graduate programs. Applicants to the MS-TCVM, MSIVM-C, MSIVM-EQ, or Graduate Certificate in Veterinary Acupuncture programs must provide the following documents:

1. Official transcripts of your earned Doctor of Veterinary Medicine (DVM) or equivalent, or official transcripts of your earned bachelor's degree and a copy of your current veterinary school identification; veterinary students must also submit their veterinary school official transcripts as proof of enrollment;
2. One letter of recommendation from a former professor, peer, or employer;
3. Copy of your driver's license (or passport);
4. The completed application form;
5. \$70 required application fee and \$50 program registration fee (\$120 total).

INTERNATIONAL APPLICANTS

In addition to the above, prospective students whose native language is not English and have earned a degree from an appropriately accredited institution where English is not the principle language of instruction must demonstrate English proficiency by submitting one of the following:

- A minimum total score of 60 on the paper-delivered Test of English as a Foreign Language (TOEFL PBT), or 71 on the Internet Based Test (iBT); 6.5 on the International English Language Test (IELTS); 50 on the Pearson Test of English Academic Score Report; 100 on the Duolingo English Test; or 55 on the 4-skill Michigan English Test (MET), or 650/LP on the Michigan Examination for the Certificate of Competency in English (ECCE), or 650/LP on the Michigan Examination for the Certificate of Proficiency in English (ECPE).

In addition, if your university can not provide official transcripts in English, you must have your transcripts evaluated and/or translated by a NACES recognized third party organization. Please see NACES.org for a complete list of approved organizations.

1. International applicants may be exempt* from the above if:
 - a. the applicant has earned a bachelor's degree or higher from an institution in an English-speaking country, or
 - b. the applicant is a citizen of an English-speaking country.

*Please contact the student administration office to verify qualifications for exemption.

All required admission documentation, as listed above, can be sent to:

Graduate Admissions Department
Chi University
9650 W HWY 318
Reddick, FL 32686

All applications are reviewed without regard to race, gender, age, religious affiliation, nationality, sexual orientation, or veterans' status.



1. STUDENT INFORMATION

LEGAL NAME: FIRST	MIDDLE	LAST	
STREET ADDRESS			
CITY	STATE / PROVINCE	ZIP	COUNTRY
PRIMARY PHONE NUMBER		PERSONAL EMAIL	
DATE OF BIRTH (MM/DD/YYYY)	COUNTRY OF BIRTH	SOCIAL SECURITY NUMBER	
CITIZENSHIP:	U.S. Immigrant / Permanent Resident	International	
COUNTRY OF CITIZENSHIP:			
GENDER		MARITAL STATUS	
Male Female		Single Married	

2. ENROLLMENT INFORMATION

SELECT YOUR PROGRAM FOR ENROLLMENT

Master of Science in Traditional Chinese Veterinary Medicine	Master of Science in Integrative Veterinary Medicine - Canine
Master of Science in Integrative Veterinary Medicine - Equine	Graduate Certificate in Veterinary Acupuncture

SEMESTER YOU PLAN TO START / ENROLL YEAR:

Spring Summer Fall

CHECK ALL THAT APPLY:

I am a new student who has not taken any previous courses at Chi University.

I am a returning student who has previously taken CE or MS courses at Chi University.

I am a transfer student who has not previously attended any courses at Chi University; I have completed at least one transferrable graduate credit from an accredited school .

RETURNING STUDENTS

CHI ID	LAST YEAR YOU WERE ENROLLED AS A GRADUATE STUDENT
I have not attended another institution since that time.	I have attended another institution since that time.
	NAME OF INSTITUTION:

3. BUSINESS INFORMATION

BUSINESS NAME	PRACTICE: SMALL ANIMAL EQUINE MIXED PRACTICE		
STREET ADDRESS			
CITY	STATE / PROVINCE	ZIP	COUNTRY
BUSINESS PHONE	BUSINESS FAX	BUSINESS EMAIL	BUSINESS WEBSITE
VET FINDER LISTING			
Yes, please add my clinic to Chi University's Vet Finder directory.			



4. ETHNICITY / RACE

To comply with federal statistical reporting requirements, Chi University must seek to identify the racial and ethnic background of all applicants. You are encouraged to supply this information, however, your application will be given the same consideration whether or not you do so. This information will not be used in a discriminatory manner.

Select one or more of the following categories to describe yourself:

- American Indian / Alaskan Native
- Asian or Pacific Islander
- Black or African American
- Hispanic or Latino
- Caucasian
- Other: _____

5. EMERGENCY CONTACT INFORMATION

LEGAL NAME: FIRST	MIDDLE	LAST	
STREET ADDRESS			
CITY	STATE / PROVINCE	ZIP	COUNTRY
PRIMARY PHONE NUMBER		PERSONAL EMAIL	
RELATIONSHIP: Mother Father Spouse Other: _____			

6. EDUCATIONAL INFORMATION

List all colleges and / or universities you have attended or are attending:

NAME OF SCHOOL	LOCATION	DATES ATTENDED		NAME & TITLE OF DEGREE RECEIVED (OR WILL BE RECEIVING)
		FROM	TO	

7. QUESTIONNAIRE

1. Please select the box below which best describes your ability to be successful in an online learning environment:

- I have earned credit or CE units by attending online training in the past.
- I attended an online course / seminar and benefited from training.
- I have never taken an online course / seminar.

2. Do you have any prior traditional Chinese or integrative veterinary medicine knowledge or experience?

- Yes No



7. QUESTIONNAIRE (cont'd)

2b. If yes, please explain.

3. How did you hear about Chi University or our graduate programs?

Mailer Social Media
Internet Conference
Email Other: _____

8. ALL APPLICANTS MUST CAREFULLY READ AND SIGN THE FOLLOWING SECTION:

By submitting your application, you certify that to the best of your knowledge, the information submitted on this application is accurate and complete. You understand that if found to be otherwise, it is sufficient cause for refusal, rescission, or dismissal. Any person knowingly making a false or misleading statement will be denied enrollment and will not be considered for any future enrollment opportunities at Chi University.

In addition, you must notify the Graduate Student Administration Office if any information provided in this application changes after submission. You also acknowledge that Chi University, at its sole discretion, may verify any information submitted with your application. You also consent to the release of your undergraduate and/or veterinary school transcript or any other material relevant to an admission decision to Chi University.

If admitted, you agree to observe all the rules and regulations of Chi University. You understand you will be responsible for payment of all amounts owed (including, but not limited to, tuition, fees, and fines). You agree to make payments promptly and that all payments will be applied to charges in the order determined by the University and you also agree to pay reasonable collection and/or attorney fees necessary to collect any outstanding balance on your account(s).

I understand that by submitting this application I certify all information provided herein is accurate and true to the best of my knowledge and I agree to the terms and conditions listed above.

SIGNATURE

DATE