Envirovet Summer Institute
Transcript Request Form

Fill in your name and address and send one transcript request to the registrar of each institution you have attended. Be sure to include your current address on each request.

APPLICATION DEADLINE: 1 March, 2010

Class size is limited and complete applications are considered in the order received.

Registrar: Please send a transcript of academic record of

Student ID number: ___________________________________________________________

Name: _______________________________________________________________________

    Last    First    Middle

Address: _____________________________________________________________________

                                                                                   
                                                                                   
                                                                                   
                                                                                   

Signature of Student: ___________________________________________________________

Please send transcript to

Director, Envirovet Program
Department of Veterinary Biosciences
College of Veterinary Medicine
University of Illinois at Urbana-Champaign
2001 South Lincoln Avenue
Urbana, IL 61802
FAX: 217.244.1652