



Tuskegee University School of Veterinary Medicine Alumnus/Alumna Data Form

Full Name _____
Please print/type

Maiden Name/Name at Graduation _____ Graduation Year _____

Home Address:

Street _____

City _____ State _____ Zip Code _____

Country/Region _____

Home Telephone Number with Area Code _____

Cell Telephone Number with Area Code _____

Email Address _____ FAX Number _____

Work Address: _____

Company or Hospital Name _____

Professional Title (ex. Owner, Partner, Director, etc.) _____

Street _____

City _____ State _____ Zip Code _____

Country/Region _____

Work Telephone Number with Area Code _____

Email Address _____ FAX number _____

Which do you wish to use as your mailing address (please circle)? Home Work

Degree (please circle or list): DVM MS in _____ MA in _____

MPH _____ PhD in _____ Board Certification _____ Other _____

Awards/Honors/Community Service _____ Date _____

Professional Category (please circle): Clinical Practice Academia Government
Not in Veterinary Medicine Retired Private Industry Other _____

My last visit to Tuskegee University was in the year of _____

Please indicate the professional activities, employment functions and employer types that most accurately describe your employment If you have more than one activity, indicate "primary," "secondary," etc.

Professional Activity

- | | | |
|--|---|---|
| <ul style="list-style-type: none"> 32 Teaching and research 02 Education 38 Administration 84 Clinical practice 36 Regulatory veterinary medicine 50 Military veterinary service 44 Diagnostic veterinary medicine 45 Industrial veterinary medicine 30 Veterinary public health 43 Extension 55 Animal technician/technologist educator 60 Other veterinary medicine 10 Bovine practice 11 Equine practice 12 Porcine practice 13 Large animal practice (all species) 14 Mixed practice (primarily large animal) 15 Mixed practice (50-50 large & small animal) 16 Mixed practice (primary small animal) 17 Small animal practice (all species) | <ul style="list-style-type: none"> 19 Feline practice 94 Pet bird practice 18 Poultry practice 93 Aquatic animal medicine 41 Laboratory animal medicine 42 Wildlife, zoo, fur-bearing animal practice 01 Food science technology 03 Agriculture 20 Anatomy/histology 86 Anesthesiology 21 Biochemistry 88 Cardiology 89 Dermatology 95 Ethology 91 Epidemiology 04 Infectious diseases 87 Internal medicine 22 Microbiology 90 Neurology 83 Nutrition 92 Oncology 82 Ophthalmology 23 Parasitology 80 Pathology, Avian 81 Pathology, Clinical 24 Pathology, Anatomical 25 Pharmacology 26 Physiology 27 Radiology 29 Surgery 85 Theriogenology 31 Veterinary preventive medicine 96 Human medicine 02 Clinical practice 03 Management 04 Education 09 Other function 01 College 02 Federal/dominion government 03 International government 04 State or local government 05 Armed forces 06 Self-employed 07 Private practice employee 08 Retired 09 Industry employee 15 Salaried agricultural veterinarian 50 Not in active practice 30 Other | <ul style="list-style-type: none"> 05 Technical writing 06 Inspection 07 Production 08 Sales or service 10 Postgraduate education 09 Other function 01 College 02 Federal/dominion government 03 International government 04 State or local government 05 Armed forces 06 Self-employed 07 Private practice employee 08 Retired 09 Industry employee 15 Salaried agricultural veterinarian 50 Not in active practice 30 Other |
|--|---|---|

Employment Function

Type Employer

Mail or FAX to: Ms. Diane Coffey, Office of External Affairs, College of Veterinary Medicine, Nursing & Allied Health,
Tuskegee University, Tuskegee, AL 36088 334-727-8121, (FAX) 334-727-8177, sdcoffey@tuskegee.edu