

Prerequisite Evaluation Request Form

Complete this form and send as an email attachment to dvmadmit@vt.edu.

1. VMCVM Prerequisite

(biochemistry, microbiology, communication/public speaking, medical terminology, science, humanities/social science)

2. Proposed Course Prefix and Number (ex: BCHM 4115)

3. Proposed Course Title
(GENERAL BIOCHEMISTRY)

4. Institution Name

5. Number of credits

6. Credit Type: (Sem/Qtr)

7. Grade received

8. Course Description

9. Justification