

## Alternative Residency Program Checklist

This checklist has been prepared to assist Alternative Resident applicants in compiling the application package accurately and completely. All documents will be uploaded online. Carefully following this checklist will ensure that all documents necessary for the residency application are included. All guidelines and forms can be found on the American College of Veterinary Sports Medicine and Rehabilitation website at [www.vsmr.org](http://www.vsmr.org). All required documents must be included in order to submit the application.

Read the *Residency Guidelines* - This section describes in detail the application requirements, including deadlines and documents required.

| TIMETABLE   |   |
|---|---|
| DEADLINE DATE   | REPORTS/APPLICATION DESCRIPTION   |
| Applications should be submitted by <b>January 30<sup>th</sup></b> for a start date of <b>July 1<sup>st</sup></b> or by <b>July 30<sup>th</sup></b> for a start date of <b>January 1<sup>st</sup></b> . | Residency application and supportive documents to be submitted to the ACVSMR office via the website, <a href="http://www.vsmr.org">www.vsmr.org</a> |
| 30 days prior to starting residency but after application approval  | Residency Registration  |
| February 1 <sup>st</sup> , 11:59 PM Mountain Time   | Resident Biannual Progress Report   |
| August 1 <sup>st</sup> , 11:59 PM Mountain Time   | Residency Annual Progress Report  |
| August 1 <sup>st</sup> , 11:59 PM (year prior to board-examination)   | Credentials application and fee   |
| September 1 <sup>st</sup> , 11:59 PM (after credentials approval)   | Examination application and fee   |

**A. Applicants for the Alternative Residency Program should prepare the application packets as follows for the deadline of either January 30<sup>th</sup> or July 30<sup>th</sup>:**

| DOCUMENTS                              | COMMENTS  | CHECK-LIST               |
|--|---|--------------------------|
| <b>Residency Training Program Plan</b> | This form is available online at <a href="http://www.vsmr.org">www.vsmr.org</a> . Be sure you and your supervisor signs the application form. Pay particular attention to filling this form out correctly, especially the email address and phone numbers.<br>Make sure you fill in the information regarding the supervisors that will participate in your training program as well as the details (timing, location and supervisor) of the rotations. | <input type="checkbox"/> |

|  |  |                          |
|--|--|--------------------------|
| <b>CV</b>                                      | Please provide a complete CV that details education, employment, and publications at a minimum.                    | <input type="checkbox"/> |
| <b>Copy of Veterinary Diploma</b>              | PDF or JPG   | <input type="checkbox"/> |
| <b>Alternative Residency Registration Form</b> | Please submit after your program has been accepted.<br>Be sure you and your supervisor sign the registration form. | <input type="checkbox"/> |

**B. Residents of the Alternative Residency Program should prepare the following documents for the deadline of February 1<sup>st</sup>, 11:59 PM Mountain Time:**

| <b>DOCUMENTS</b>                         | <b>COMMENTS</b>                                | <b>CHECK-LIST</b>        |
|--|--|--------------------------|
| <b>Resident Biannual Progress Report</b> | Be sure you and your supervisor sign this form | <input type="checkbox"/> |

**C. Residents of the Alternative Residency Program should prepare the following documents for the deadline of August 1<sup>st</sup>, 11:59 PM Mountain Time (annually for the duration of the residency):**

| <b><u>DOCUMENTS</u></b>                                 | <b><u>COMMENTS</u></b>  | <b><u>CHECK-LIST</u></b> |
|---|---|--------------------------|
| <b>Resident Progress Report Certification Statement</b> | Signed and dated<br>Please ensure that <i>your</i> Resident Supervisor certifies your report. | <input type="checkbox"/> |
| <b>Master Log:</b>                                      |   | <input type="checkbox"/> |
| • <b>Case log</b>                                       |   | <input type="checkbox"/> |
| • <b>Continuing Education Requirements</b>              |   | <input type="checkbox"/> |
| • <b>Oral presentations</b>                             |   | <input type="checkbox"/> |
| • <b>Publication requirements</b>                       |   | <input type="checkbox"/> |
| <b>Previous communications with the ACVSMR office</b>   |   | <input type="checkbox"/> |