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6539 Gordonsville Road  
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 Office (434) 951-9225  
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**Externship Questionnaire**

Name \_\_\_\_\_ Date \_\_\_\_\_

Name of School \_\_\_\_\_ Year of Graduation \_\_\_\_\_

Area of Concentration or Track (if applicable) \_\_\_\_\_

Email Address \_\_\_\_\_

Requested Dates \_\_\_\_\_

**What are your primary areas of interest in the field of veterinary medicine? Please circle all that apply.**

- |                              |                                 |                                 |                      |
|------------------------------|---------------------------------|---------------------------------|----------------------|
| Food Animal/Equine<br>Mixed  | Mixed Large and Small<br>Animal | Lameness                        | Dentistry            |
| Equine Only                  | Small Animal Only               | Reproduction and<br>Neonatology | Sport Horse Medicine |
| Small Animal/Equine<br>Mixed | Radiology                       | Ophthalmology                   | Surgery              |

**What type of experience do you have handling or treating horses? Please circle all that apply.**

- |  |                                      |  |   |
|--|--------------------------------------|--|---|
| I own and ride horses  | Competitive hunter/<br>jumper rider. | Ride for fun, no formal<br>riding instruction. | Work as a veterinary<br>technician                    |
| Family operates a horse<br>farm                              | Competitive dressage<br>rider.       | 4-H  | Work as a groom                                       |
| Family owns an<br>agricultural farm and<br>has a few horses. | Competitive eventing<br>rider.       | Pony Club                                      | Work in a stable<br>performing general<br>barn duties |

**What attracted you to the externship opportunity at Old Dominion Equine Associates?**

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**Tell us about you! Do you have any hobbies or extracurricular activities?**

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