

# THE EQUINE CLINIC AT OAKENCROFT

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## High School Student Application

Contact Person: Stacy Mayhew  
Contact Email: [sm@oakencroft.org](mailto:sm@oakencroft.org)

Interested students should review the materials on our website and then submit this application to schedule a visit. Please note that due to the nature of our practice, we prefer students be 16 years and older; younger students may still apply but will require special permission from the practice managers.

Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

School: \_\_\_\_\_

Graduation Date: \_\_\_\_\_

Address: \_\_\_\_\_

Phone (list all numbers we may reach you or an emergency contact at in an emergency): \_\_\_\_\_

\_\_\_\_\_

Email: \_\_\_\_\_

Dates requested for visit (to be approved by ECO staff): \_\_\_\_\_

Do you drive? \_\_\_\_\_

Do you have a vehicle available or will you be dropped off? \_\_\_\_\_

Can you meet the veterinarians at a location other than the office? \_\_\_\_\_

Major areas of interest you would like to have addressed during your visit: \_\_\_\_\_

\_\_\_\_\_

Are you earning school credit for this visit? \_\_\_\_\_

Do you have a form/evaluation we will need to fill out? \_\_\_\_\_

High School Student Application, Updated January 10, 2017

How did you hear about us?

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How much horse experience do you have (please provide specifics)?

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Please provide a brief paragraph detailing why you would like to ride with us:

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