

**Virginia Military Institute**  
**Instructions for Medical Requirements**

PLEASE DO NOT SUBMIT MEDICAL FORMS TO ADMISSIONS VIA BOX. PLEASE DO NOT MAIL, FAX OR EMAIL COMPLETED FORMS TO US.

Questions? Please contact us at 540-464-7218 or Email: [Infirmmaryadmin@vmi.edu](mailto:Infirmmaryadmin@vmi.edu)

**STEP 1:**

**Register for the MedicaT cadet portal:**

1. Go to <https://vmi.medicatconnect.com>
2. Click Register to create your user name and password
3. Once you click submit, an email will be sent to the **email on file with the VMI Admissions office** and will include a link to create your password. If you do not receive the email, please check your junk or spam folders. Please make sure you use the correct email address.

Your password must include:

- A special character
- A mix of letters and numbers
- A mix of upper and lower case
- A minimum of 5 characters

**STEP 2:**

**The following medical forms are included in this packet and must be completed as explained on enclosed Medical Checklist:**

**Completed by Health Care Provider:**

1. History of Physical Examination form
2. Body Fat Measurement form
3. Immunization Record
4. Medical Release (Certificate of Understanding) form

**Completed by applicant:**

1. Online VMI Health History (*form not included in packet -see Step 3 for instructions*)
2. Cadet Health Insurance form

**STEP 3:**

**Log in to your cadet portal account at <https://vmi.medicatconnect.com> to complete the following:**

1. Select "**Forms**" to complete your online **VMI Health History**
2. Select "**Immunizations**" and manually enter the dates from the immunization form completed by your healthcare provider. This step is REQUIRED IN ADDITION to uploading the form.
3. **Upload** the following completed forms (*from Step 2*):
  - a. History of Physical Examination Form
  - b. Body Fat Measurement form
  - c. Immunization Record
  - d. Medical Release (Certificate of Understanding) form
  - e. Cadet Health Insurance form
4. Select **Insurance**, enter your insurance company information and upload copy/photo of both sides of health insurance card.