



Australasian Veterinary Boards Council Inc.

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A0039074L

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APPLICATION FOR ASSESSMENT OF ELIGIBILITY FOR REGISTRATION AS A VETERINARY SPECIALIST IN –

New Zealand

Please read the following checklist before applying for registration as a veterinary specialist:

- Applicants must be currently registered as a veterinarian/veterinary surgeon by the registering authority to which they are applying for specialist registration.
- If you wish to apply for registration as a specialist in more than one category, you will need to complete a separate application for each category and pay an application fee for each category.
- All parts of the form should be completed. Use separate sheets to answer any questions where there is insufficient room provided. Any appended information must be clearly cross-referenced to the application form.

The documentation required in support of the application is as follows:

- **A comprehensive curriculum vitae** that provides information on qualifications, professional employment and activities, as well as, publications; conferences attendances and ongoing participation in the profession
- **Evidence of membership in professional bodies relevant to specialist qualification**
- **Certified copies of postgraduate qualifications**
- **Evidence of current registration/practising status** (e.g. copy of registration certificate, receipt of payment for renewal of registration or specific confirmation by Registering Authority where a current registration certificate is unavailable.)
- **Applicable fees**
- **Completed application form**

The following application form must be completed. Please ensure that you have the most recent version of this form. Photocopy, download, or remove it from the booklet to submit your application. The application is to be **typed and submitted unbound**.

**APPLICATION FOR ASSESSMENT OF ELIGIBILITY FOR REGISTRATION AS A
VETERINARY SPECIALIST**

(Please answer with care as long delays occur if incomplete.)

1 Full Name:

2 Postal address:

Telephones:

Facsimile:

Email:

3 Nominated specialty:(Annexe A)

Sub-category: (if applicable)

4 Primary Veterinary Qualification:

(i) Qualification

(ii) Abbreviation

(iii) Conferring authority

(iv) Year obtained

(v) Year of first registration as a veterinarian/veterinary surgeon

(vi) Number of years practicing as a veterinarian/veterinary surgeon

- (iv) **Length of training program** – (please tick the appropriate option)
 - 96 weeks (2 yrs).....
 - 156 weeks (3 yrs).....
 - other – please specify.....

- (v) **Supervisors** (please supply the names, specialty qualifications and contact details):

- (vi) **Other higher degrees** (if applicable)

- (vii) **Research projects undertaken during training program**

6 Examinations:

Describe examination type and length:

Writtenhrs
 Oralhrs
 Practicalhrs
 Other.....(please specify)

PROFESSIONAL ACTIVITIES

7 (a) How would you describe your current activities in your specialty? (please circle)

Referral practice	Teaching
Research	Government
Consultancy	Other (please describe)

(b) Evidence of referral or specialist practice

(i) What proportion of your working time is spent currently in your specialty? (Minimum requirement is 25 hrs per week)

(a)% (b)hours per week.

Current Place (and period) of Employment:

.....

(iv) **Maintenance of publication record**
(please provide details)

8 I enclose a certified copy of relevant certified post graduate qualification certificate(s) _____(tick)

NOTE: Copies of originals must be certified by a person authorised to do so under the legislation of the jurisdiction in which you are making this application.

e.g For ANZCVSc applicants include a copy of 'Final Fellowship Credentials Report' (2 page report only).
For ECVS applicants include a copy of 'Evaluation Form and Supervisors Report'
For other candidates documents equivalent to above.

9 **Payment Method (please tick)**

I have enclosed a cheque or money order for AUD\$1,200
Cheques or money orders should be made payable to "AVBC Inc"

or

I have made an online credit card payment through the AVBC website at www.avbc.asn.au for AUD\$1,215
(Payment by credit card incurs an extra 1.25% fee to cover bank charges)

or

I authorise AVBC to debit my credit card with AUD \$1,215
(Payment by credit card incurs an extra 1.25% fee to cover bank charges)

Credit Card type: Mastercard Visa

Card Holder's Name: _____

Credit Card Number: _ _ _ _ _ _ _ _ _ _

Expiry Date: _ _ / _ _

Signature: _____

or

I will pay AUD\$1,200 by direct credit. (You will need to contact the AVBC office for this option).