

Completing your APC application or choosing another practising status

- 1. When you're ready, click on the "Apply for APC to" button on the left-hand side of the page.
 - a. Please note questions need to be answered in one application.

Suppo	ort and Information	Resources Abou	ut News Contact Sign O	ut				
	My Vet Details	My Contact Details	APC Payments and emails	Preferences	My Audit	Application Attachments		
wiy v C	My contact de	tails					/ 4	
Dr Joe Bloggs	Practice				Preferred Nam	e Joe		
Practice Unknown	Company	Practice Unknow	rn		Publish Mobile	No		
Registration Number 1					Phone			
Type Vet	Mobile Phone	(027) 653-8774			Publish Busine: Phone	s No		
ARC expire date 21/02/2024	Work Phone				Publish E mail	No		
APC expiry date 31/03/2024	Email	<u>Testadmin@vet</u>	council.org.nzTest		Publish Mobile Phone	No		
Print Registration Certificate	Home Phone							
	Region/Province							
Request a Letter of Good Standing					Publish Home	No		
Request Name Change					Address	tion No		
View my public profile					Share mornat	ion No		
	My addresses						A	
Apply for APC to 31/03/2025	Address +							
							# /	
	VCNZ Test Person	1						
Print APC	36 Brandon St Ba	yleys						
	Wellington 6143							
My Communities	04 473 9600							
You have not joined any communities	<u>Testadmin@vetc</u>	ouncil.org.nzTest						
View All Communities								

2. You will be taken to the next page where you will click on "Start Renewal".





- 3. Select the year you are practising, and your practising intention from 1 April.
 - a. Please note if you are Retired but want to still receive updates, select Non-Practising to pay the Annual Maintenance fee.

VTERNAT COUNCI In the Balance	Support and Information	Resources Abo	out News	Contact	Sign Out		
							L
Annual practising cert	ificate						L
Refer to our APC guidance to help you complete this form. If you hav	e any questions or need assistance, you can contac	t us at <u>vet@vetcou</u>	ncil.org.nz.				L.
Your practising intentions							L.
Please indicate your practising intent for the upcoming year.							L
Practising Choose this option if you intend to practise as a veterinari. Retired Choose this option if you have recently retired, or are abo Non-practising Choose this option if you are not intending to practice as a Applied to be removed Choose this option if you no longer wish to practice as a vite work as a veterinarian in New Zealand again). APC Year, starting 1 April 2024 Practising Intent (None)	in and wish to apply for an Annual Practising Certifi at to do so, and no longer wish to practice as a veter veterinarian and wish to remain on the Register as iterinarian in New Zealand and wish to be removed	icate. rinarian but wish to a non practising Ve from the register e	remain on the sterinarian. ntirely (if you o	Register as i	a Retired Veterinarian. Ill need to apply for reg	gistration again if you ever want	

4. You will be taken to the first page of the APC renewal form which starts with the Public register and information sharing and Recency of Practice information. Proceed through the form and answer the questions. If a question has a red asterix (*) by it, it must be answered before you can proceed. Depending on your answers, you may be asked to provide more information. If you're unsure what information to provide, refer to the <u>Guidance Notes</u>. At the end of each page, click Continue. You will then answer the Fitness to practice and Workforce Survey questions.

We will publish your name, practice/employer name, qualifications, practising status, registration date and APC commencement date on our public	
un your practice of suspension, it applicable	register. The register will also show any details of any condition
By completing this application, you are indicating that you consent to the above information being published. If you have any concerns about this, p personal information, see our Privacy Policy .	please contact us. For more information about how we handle
If you request it, we can also publish other contact information for you. You can change what optional information we show on the public register in	n your profile on MyVC.
1.2 Recency of practice information	
*Are you a new Graduate (i.e. completed the course requirements for your primary veterinary qualification within the last 12 months)? (None) 👻 Required field	
'Have you worked as a veterinarian during the last three years?	
(None) Y Required field	
During the previous year did you work in a field of activity you've never practised in or haven't practised in during the last three years?	
(None) V Required field	
Are you seeking to work in a field of activity you've never practised in or haven't practised in during the last three years?	
(None) V Required field	
Have you practised outside NZ since you were last issued with an APC?	
(None) V Required field	





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Fitness to practice

Please answer the questions below. They help us understand if there are any issues that could affect your ability to practise. If you declare anything, we will contact you to talk about it. If you are in doubt about telling us about an issue, it's best to let us know. For more information, see our Guidance page.

During the last year (or before if you haven't told us previously), have you been subject to:

*Any investig d or overseas, by an emplo (None) ~

*A formal com (None) 🗸

*An adverse fin

(None) ~

*A police investig (None) 🛩

Any new or co nuing mental or physical condition with the potential to including physical deterioration due to injury, disease or degeneration? (None) ~

Edit source form
Workforce Survey
The following information will be used for statistical and research purposes and will not be published in a form that could identify any individual.
Please answer the questions below and check our Guidance page if you are unsure about any questions.
Were you engaged in veterinary practice (which includes non-clinical work) in New Zealand during the year ended 31 December 2022? (None) 🗸
What was your main (primary) role type?
(None) ~
Do you have secondary employment?
(None) V
Do you have another employment?
(None) 🗸
Which ethnic group do you belong to?
(None) v
Second ethnic group ?
(None) v
What is your gender?
(None) v
Do you consider yourself transgender?
(None) V
Continue - Declaration

5. Once you're finished with the form, you will be asked to make a declaration that the information you provided is true and correct. It's important that you are happy with your form before you click Next because you won't be able to change it after this point. Click Pay APC.

Edit source form	
Annual practising certificate declarations	
*I confirm that I have read and understand the Code of Professional Conduct for Veterinarians and the CPD Information for Veterinarians document (None) v	
 I confirm that I am complying with the expectations set out in those documents (None) 	
*The information I have given in this application is true and correct (None) 👻	
By submitting this application and making payment, you are indicating you accept our <u>Refunds and cancelations policy</u> .	
Pay APC	,



6. Once you have completed the form, you will be taken to the payment screen. First click on Add to Cart, and then select View Cart.

VITE MAR COUNCI VITE MAR COUNCI VIEW DUCTOR VIEW	Support and Information	Resources	About	News	Contact Sign Out			<u>,</u>
Fees								
APC								
This item has been added to your cart <u>View Cart</u>								
Term dates 1/04/2024 to 31/03/2025								
Membership Fees								
Item						Unit Price	Quantity	Amount
Annual Practising Fee						532.00	1	532.00
							Subt	otal 532.00
							/iew Cart Up	idate Cart

7. From this page you can select your payment method, Visa, Mastercard, Debit card or Account to Account. *Please note your payment will be processed through our payment gateway*, *Ezidebit*.

VIEBBAAR COURCE	Support and information Resources About New	rs Contact Sign Out		
Shopping cart				
Items				
APC (includes 69.39 GST) (1/04/2024 - 31/03/2025)	1	532.00	532.00	Remove
				Update
	Cart charges			
	Item total	532.00		
	Shipping	0.00		
	Handling	0.00		
	TRANSACTION GRAND TOTAL	532.00		
	Promotional code	Apply		
	Payment details			
	Payment amount 532.00			
	Payment method Cash 🗸			
	Check number			
	If you have chosen to pay by Credit or Debit car	rd, your statement will show the pay	ment taken by EziDebit	
				Submit Order

8. Once payment is successful, you will be taken to an order confirmation screen and confirmation will also be sent to your email. You can close your browser if you wish.

Your application will be processed, and you will receive another email letting you know once it's approved, or we will contact you if we need more information.