



## Veterinary Practitioners Registration Board of Victoria SPECIFIC REGISTRATION INFORMATION

### Information

To apply for General Registration your qualification must be included in the list of accredited universities on the Australasian Veterinary Boards Council Inc (AVBC) website. Link to the AVBC list of accredited qualifications and recognised universities: <http://avbcpreview.azurewebsites.net/skills-assessment> .

If your qualification is not recognised by the AVBC, applicants may apply for Specific Registration on the proviso that you satisfy the requirements under section 7(1) of the *Veterinary Practice Act 1997* (the Act):

- a. To enable that applicant to undertake supervised study or training or a course approved by the Board at a tertiary institution; or
- b. To enable that applicant to fill a veterinary teaching or research position at a tertiary institution approved by the Board; or
- c. To enable that applicant to undergo training under direct supervision of a registered veterinary practitioner, to acquire the competencies required to be registered under Section 6; or
- d. If the Board is of the opinion that, in order to meet an identified need for a veterinary practitioner, it is necessary for a person having qualification in the nature of the applicant's to provide veterinary services; or
- e. To enable an applicant from another country to practise in Victoria if that applicant has exchanged practice with a registered veterinary practitioner for a limited period with the prior permission of the Board.

Registrations granted under section 7(1) of the Act may be subject to conditions, limitations or restrictions as set out in section 7(2) of the Act. Specific Registration must not exceed 12 months, after which time a new application for Specific Registration must be made to the Board, if registration in Victoria is still required.

### Lodging an Application

Applications for Specific Registration must include the following documents:

- A complete application form, correctly witnessed by a person authorised under section 107A of the *Evidence (Miscellaneous Provisions) Act 1958* – see next page for further information
- Certified copy of your degree (Please note that originals will not be returned)
- Certified copy of current photographic identification, either passport or current driver's licence
- Letter of Professional Standing from the most recent registration authority under which you were registered
- Curriculum vitae of your veterinary and other activities
- Payment of the prescribed fees. Please refer to the website for the current fee schedule.

To ensure that your application is processed as efficiently as possible, we recommend that you ensure your application is as complete as possible.

### Additional documentation

**7(1)(a)** Letter addressed to the Board confirming your acceptance into a Board approved tertiary course, study or training program with detailed information about the course, study or training program. A supervisor's agreement may be required and supervisors must be registered in Victoria.

**7(1)(b)** Letter addressed to the Board from a Board approved tertiary institute confirming your research/teaching position, which states: the institutional department; the position title; the period of employment; details of the supervising veterinary practitioner/s; and any other relevant information.

**7(1)(c)** Attach documentary evidence to confirm:

Australasian Veterinary Boards Council Incorporated acceptance to sit the National Veterinary Examination successful completion of an English language exam and the Multiple Choice Question exam offer of veterinary employment and [supervisor's agreement](#): please note that supervisors must be registered in Victoria.

**7(1)(d)** Attach a statement detailing your area of expertise and reason for applying for specific registration. If you have been offered veterinary employment, your employer is to write to the Board detailing: why your expertise is required; the period of employment; and who will be the supervising veterinary practitioner/s. Please note that a condition of registration may require you to work under indirect or direct supervision. Direct supervision means ongoing, continuous and direct personal supervision by a registered veterinary practitioner. The supervising registered practitioner must be on the same premises or in the case of a visit, must accompany the person being supervised.

### Recommendation to the Board

The Registration Committee will assess your application and make a recommendation to the Board; therefore, your application may take some time to process.

**Please post all documentation as faxed or emailed correspondence is not accepted.**



**Veterinary Practitioners Registration Board of Victoria**  
**APPLICATION: SPECIFIC REGISTRATION**  
 Section 7 of the *Veterinary Practice Act 1997 (Victoria)*

1. Please read the checklist of requirements and information sheet prior to completing this application.
2. This form is for applicants who do not qualify for general registration.
3. The Board does not accept faxed, photocopied or emailed application forms or supporting documentation.

**PERSONAL**

Family (legal) Name \_\_\_\_\_  
 First Name \_\_\_\_\_  
 Middle Name (s) \_\_\_\_\_  
 Previous Names \_\_\_\_\_  
*Provide certified evidence of any name change if different names used (e.g. marriage certificate)*

Date of Birth \_\_\_\_ / \_\_\_\_ / \_\_\_\_       Male    Female

**RESIDENTIAL ADDRESS**

Street Address \_\_\_\_\_  
 Suburb \_\_\_\_\_ State \_\_\_\_\_ Postcode \_\_\_\_\_  
 Telephone \_\_\_\_\_ Mobile \_\_\_\_\_  
 Email \_\_\_\_\_

**BUSINESS ADDRESS**

Business Name \_\_\_\_\_  
 Street Address \_\_\_\_\_  
 Suburb \_\_\_\_\_ State \_\_\_\_\_ Postcode \_\_\_\_\_  
 Telephone \_\_\_\_\_ Mobile \_\_\_\_\_  
 Email \_\_\_\_\_

**SPECIFIC REGISTRATION TYPE**

*Please indicate the relevant category of specific registration:*

- 7.1(a) To undertake supervised study or training or a course approved by the Board at a tertiary institute   
 7.1(b) To fill a veterinary teaching or research position at a tertiary institution approved the Board   
 7.1(c) To undertake training to acquire the skills for general registration (*applicable for NVE only*)   
 7.1(d) To meet an identified need for veterinary services in the profession, as identified by the Board.

**PROFESSIONAL**

Qualification (e.g. BVSc) \_\_\_\_\_ Graduated from \_\_\_\_\_ Year graduated \_\_\_\_\_

**Provide a letter of Professional Standing from the registration authority of which you were last registered.**

Name of registering authority \_\_\_\_\_

Date of initial registration \_\_\_\_\_ Registration number \_\_\_\_\_

OFFICE USE ONLY	Degree	CV	LOPS	S Dec	Cert ID	St Date	SA	LTB	Fee	OOS	Vic Add	Reg #	Cert #
	Notes												
	Approved						App #				iMIS		

## STATUTORY DECLARATION

I \_\_\_\_\_ (insert full legal name)  
of \_\_\_\_\_ (Address)

do solemnly and sincerely declare that :

I am the person named in this application and the attached documents and that the information I have provided is true and correct in every detail.

### Please answer Yes or No to the following questions:

1. Have you, in the past twelve months, been found guilty of any professional misconduct, or any unprofessional conduct?  
Yes  No
2. Have you, in the past twelve months, been subject to any disciplinary actions or proceedings (including any preliminary investigation or action that might lead to disciplinary proceedings) by any body or authority constituted to discipline veterinary surgeons/practitioners?  
Yes  No
3. Have you, in the past 10 years been found guilty of an indictable offence in Victoria or an equivalent offence in another jurisdiction?  
Yes  No
4. Have you ever had your registration cancelled or suspended?  
Yes  No

If you have answered yes to questions above, please attach a statement outlining the details.

5. I consent to the Veterinary Practitioners Registration Board of Victoria (the Board) exchanging information with authorities in participating jurisdictions in regard to my practise as a veterinary practitioner and any other matters relevant to this application.
6. I consent to the Board collecting and using my personal information in accordance with the Board's Privacy Policy/Statement (see below).

I acknowledge that the Board may impose conditions on the granting of specific registration and that the specific registration will expire on the date specified on the registration certificate or 12 months from the date of the registration, whichever occurs first and that I am responsible for re-applying for this specific registration before the expiry date.

I make this declaration in the belief that a person making a false declaration is liable to the penalties of perjury.

Signature of **applicant** \_\_\_\_\_

Declared at (place) \_\_\_\_\_

this (day) \_\_\_\_\_ day of (month) \_\_\_\_\_ year \_\_\_\_\_

Signature of **authorised person** to take declarations \_\_\_\_\_

Declared at (place) \_\_\_\_\_

this (day) \_\_\_\_\_ day of (month) \_\_\_\_\_ year \_\_\_\_\_

Print Name \_\_\_\_\_

Qualification of **authorised person**: \_\_\_\_\_ (e.g.: Justice of the Peace)

## PRIVACY STATEMENT

The Veterinary Practitioners Registration Board of Victoria is committed to handling personal information in a responsible manner, having regard to your right to privacy. Information on this form is being collected under the provisions of the *Veterinary Practice Act 1997* (Victoria) and associated regulations and will be used to process your application for registration. The Board's privacy policy is available from <http://www.vetboard.vic.gov.au>. To process your application and carry out our primary functions, the Board will exchange information about you with other organisations, such as Australian and overseas veterinary practitioner registration boards, other federal and/or state government regulatory authorities; registered medical practitioners, complainants and the Board's solicitors as well as drug wholesalers. In accordance with the law, once you are registered, some of your information will be made publicly available. The public register includes your name, registration number, your practice address details or your postal address details (but not your private address details unless you elect to display this on the public register), your qualifications, any current conditions, limitations or restrictions on your registration and any specialist endorsement. The Board may also make public any languages that you speak other than English (if you choose to provide this information). Some of this information can be searched on the Board's website such as: name, registration number, postcode, suburb and speciality (if applicable). Any person may obtain an extract or copy of the public register.

**PROPOSED EMPLOYMENT TYPE - please select 1 type only**

**Private Practice**

- Small Animal (PPS)
- Mixed (PPM)
- Large Animal (PPL)
- Equine (PPE)
- Production (PPP)

**Government Officer**

- Commonwealth (GOC)
- State (GOS)
- Local (GOL)

**Other**

- Pharmaceutical Industry (PI)
- Research & Development (RD)
- Pathology Services (PA)
- Exotics and/or wildlife (EXW)
- Retired (RT)
- Treatment own animals only (TOA)
- Other veterinary (OV)

**University**

- University Teacher (UT)
- University Research (UR)

**Government Research**

- Commonwealth (GRC)
- State (GRS)

**PAYMENT AUD\$**

Registration payments can be made via the following methods

**BANK / PERSONAL CHEQUE**

**MONEY ORDER** Number \_\_\_\_\_

**CREDIT CARD**     Visa     Mastercard

Credit Card Number \_\_\_\_\_

Name on Card \_\_\_\_\_ Expiry Date \_\_\_\_/\_\_\_\_

Signature of Cardholder \_\_\_\_\_ \*Amount \$ \_\_\_\_\_

Total \$ \_\_\_\_\_

See the Board's fees page for current specific registration charges - [www.vetboard.vic.gov.au](http://www.vetboard.vic.gov.au)  
Please ensure you have sufficient amount of funds available to complete the transaction required.

**APPLICANT CHECKLIST**

I enclose

- Completed application form witnessed and signed
- \*Letter of Professional Standing (if applicable)
- Certified copy of Degree
- Certified ID documents
- Curriculum Vitae
- \*Completed Supervisor agreement form
- \*Additional documentation as stated on Information Sheet

**MAIL**            Veterinary Practitioners Registration Board of Victoria, Level 11 470 Collins St, MELBOURNE 3000

**TELEPHONE** +613 9620 7444 Monday to Friday between 9am and 5pm

**EMAIL**            [communications@vetboard.vic.gov.au](mailto:communications@vetboard.vic.gov.au)

**WE ACCEPT EMAILED APPLICATIONS**

**(ALL DOCUMENTS MUST BE GOOD QUALITY PDFS NOT SMARTPHONE IMAGES)**