



VETERINARY
PRACTITIONERS
REGISTRATION
BOARD OF
VICTORIA

APPLICATION FOR
REGISTRATION AS A
VETERINARY SPECIALIST

From Practitioners who hold specialist registration in another jurisdiction

I,

Of.....

Postcode.....

hereby apply for endorsement as a veterinary specialist under Section 8 of the Veterinary Practice Act 1997 and provide the following information:

1 Specialty Category:

2 Date First Granted:

3 Registration Number:

4 Where First Granted: NSW QLD SA WA TAS ACT NT NZ
(circle one only)

5 Held in other jurisdictions? NSW QLD SA WA TAS ACT NT NZ
(please circle)

6 Specialist registration first granted five or more years prior to the date of this application? YES NO

If no, go to number 7.

If yes, provide the names and contact details of three general practitioners who regularly use your services. The Board will contact these practitioners to support your application.

a) Name

Address

Telephone Facsimile Email

b) Name

Address

Telephone Facsimile Email

c) Name

Address

Telephone..... Facsimile..... Email

7 Letter of professional standing from jurisdiction in which you are currently registered.

Declaration:

I understand that the granting of endorsement under Section 8 of the Veterinary Practice Act 1997 entitles me to practise as a specialist in the State of Victoria only.

Signed:

Date:

Level 11, 470 Collins Street,
Melbourne, Victoria, Australia 3000
Telephone +613 9620 7444
Facsimile +613 9620 7044
Email enquiries@vetboard.vic.gov.au