

Request for letter of professional standing

Veterinary Practitioners Registration Board of Victoria



➔ Your information

| | | | | | |
|------------------------------------|--|-------|--|----------|--|
| Victorian registration number | | | | | |
| First name | | | | | |
| Middle name(s) | | | | | |
| Given name | | | | | |
| Previous names | ➔ If you have not advised us of a change of name, please complete and return Change of Name form . | | | | |
| Email address | | | | | |
| Mobile phone | | | | | |
| Residential street address | | | | | |
| Suburb/Town | | State | | Postcode | |
| Country | | | | | |
| Veterinary qualification, e.g. DVM | | | | | |
| Institution, e.g. university | | | | | |
| County of qualification | | | | | |
| Year awarded qualification | | | | | |

➔ Where do you want us to send the letter of professional standing (LOPS)?

Registration authority:

| | | | | |
|----------------|--|-----------|--|--|
| Authority name | | | | |
| Contact person | | Job title | | |
| Email address | | | | |
| Postal address | | | | |
| Country | | | | |

If you want a letter sent to more than one authority on the same date, advise the second authority below:

| | | | | |
|------------------|--|-----------|--|--|
| Second authority | | | | |
| Contact person | | Job title | | |
| Email address | | | | |
| Postal address | | | | |
| Country | | | | |

PLEASE COMPLETE THE INFORMATION ON THE NEXT PAGE

➔ Are you leaving Victoria?

If your principal place of residence is now or will be in another jurisdiction, you do not need to retain your Victorian registration. You can ask the Board to remove your name from the Register of Veterinary Practitioners on a nominated date (general registration expires at the end of the financial year on 30 June)..

Do you want your name to be removed from the Victorian Register of Veterinary Practitioners? Yes No

If yes, date to be removed from Register

Reason for removal

Declaration if you wish your name to be removed from the Register

1. I request the removal of my name from the Register of Veterinary Practitioners on the above date.
2. I understand that if I am not registered in Victoria or another Australian State or Territory I must not practise as a veterinary practitioner.
3. I understand that voluntary removal means that I will be able to apply to re-register and be reinstated to the Victorian Register of Veterinary Practitioners in the future.
4. I understand that if I apply to re-register after a period during which I have not practised as a veterinary practitioner, the Veterinary Practitioners Registration Board of Victoria may ask me to supply evidence of my competency to practise.

Signature

Date

➔ RETURNING THIS FORM AND NEXT STEPS

Please print, scan and email the completed form to communications@vetboard.vic.gov.au.

After we receive your request, we will contact you on the telephone number you have provided to obtain payment details for the LOPS service fee. If we need any more information from you to process your request, we will ask for it at that time.

The LOPS will be sent within business days of successful payment.

Note that letters of professional standing are only valid for 3 months from the date of issue.

You will receive a copy of the email we send the registration authority.

Questions? please call Vetboard Victoria on +61 3 9620 7444.