



Veterinary Experience Verification Form

Student's Name: _____ Student ID: _____
Phone Number: _____ Email Address: _____

To ensure that students gain a complete understanding of the Veterinary Technician profession, there is a mandatory observation period of at least 4 hours of shadowing at a veterinary clinic.

Applicants' observation hours must have been completed within the past year. Additionally, the current observation hours are only valid for this year's application and may not be used again for future applications. This form **must be submitted with your Veterinary Technology application, no later than August 15th of each year.**

OPTION 1: JOB SHADOW

The 4 hours of shadowing can be done at more than one veterinary clinic. Attendance must be verified by the Credentialed Veterinary Technician's signature below.

Veterinary Clinic Name: _____ Phone Number: _____
Address: _____ City: _____ State: _____ Zip: _____
Date(s) of Attendance: _____
Number of Hours: _____

Name of Credentialed Veterinary Technician: _____
Signature: _____ Date: _____

OPTION 2: EMPLOYER

If you are currently employed at a Veterinary practice, you must have the Veterinarian sign below, verifying your employment.

Job Title: _____ Employment Start Date: _____ Average hrs/week: _____
Briefly list job duties: _____
Signature of Veterinarian: _____ Date: _____

OPTION 3: VETERINARY ASSISTANT PROGRAM

If you have successfully completed a Veterinary Assistant program, you must have the program director sign below.

Signature of Program Director: _____ Date: _____