

	Exam application form Document ID: 3.1	Document name: Exam application form v1.doc	Page 1/5
		Date of creation/revision: 28/02/2012	Version 1

Personal and Educational Background

Name:

First Name:

Organization:

Address:

Phone:

Fax:

Email:

Veterinary Degree:
Veterinary School:

Year:

Please provide a copy of your veterinary diploma

OR

Veterinary License:
Issued by:

Year

Please provide a copy of your veterinary license

ESVCP membership:

Please include a regular Curriculum vitae with your application.

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Work Experience Summary

1.1	Institution: Experience*
	Position:

1.3	Institution: Experience*
	Position

1.4	Institution: Experience*
	Position:

* applicable months of experience as calculated on the work experience documentation sheet.

Work Experience Documentation Sheet

Institution:

Position:

Brief Description:

Begin (yr/ mo):

End (yr/ mo):

Duration (months):

Applicable Months of Experience (1 month per 1 month duration):

Provide the percentage of time spent in the following areas. %
--

(Check the application guide for details. Percentage should be in relation to a full time position)

administrative

other (please explain)

Percentage of professional time spent in veterinary clinical pathology
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(this should be the same as the total of the above percentages)

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Institution:

Position:

Brief Description:

Begin (yr/ mo):

End (yr/ mo):

Duration (months):

Applicable Months of Experience (1 month per 1 month duration):

Provide the percentage of time spent in the following areas. %

(Check the application guide for details. Percentage should be in relation to a full time position)

haematology:

cytology:

consulting:

Percentage of professional time spent in veterinary clinical pathology:

(this should be the same as the total of the above percentages)

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Institution:

Position:

Brief Description:

Begin (yr/ mo):

End (yr/ mo):

Duration (months):

Applicable Months of Experience (1 month per 1 month duration):

Provide the percentage of time spent in the following areas. %

(Check the application guide for details. Percentage should be in relation to a full time position)

clinical biochemistry:

endocrinology:

haematology:

cytology:

consulting

Percentage of professional time spent in veterinary clinical pathology:

(this should be the same as the total of the above percentages)

Confirmation by the immediate supervisor

Name:

I confirm that I was the candidate's supervisor during the time indicated above and that the information on this form is accurate.

Date: **Signature:**

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Publications

First Author Publications:

Authors:
Year:
Title:
Journal:
Volume/Pages:
Type of article:

Authors:
Year:
Title:
Volume/Pages:
Type of article:

Other Publications:

Authors:
Year:
Title:
Journal:
Volume/Pages:
Type of article: If you are not the first author briefly describe which part of the publication is based on your contribution:

Authors:
Year:
Title:
Journal:
Volume/Pages:
Type of article:

Author: Zoe Polizopoulou, Alessia Giordano

Date approved: 24/02/2012

Category: 3 – Members