



College of Veterinarians of British Columbia

COMMITTEE APPLICATION FORM

Name _____

Registrant Number _____

Phone _____

E-mail _____

Address _____

Please check the box next to the Committee(s) of interest to you.

- Continuing Competence Committee
- Discipline Committee
- Investigation Committee
- Practice Facility Inspection Committee
- Registration Committee

Please include with your application:

- A current resume which includes qualifications, skills and experience
- A description of why you would like to sit on the Committee(s)
- Confirmation that you are able to commit the required time

Please send this form with the attachments to the CVBC office by e-mail, to feedback@cvbc.ca