

APPLICATION FOR REGISTRATION

Any veterinarian wishing to practice veterinary medicine in British Columbia must first be granted registration by the College of Veterinarians of British Columbia.

The process of registration with the CVBC is governed by the *Veterinarians Act* and the CVBC Bylaws (Part 2 – Registration). Applicants are responsible for reviewing the information in the “Registration Application Guide” on the CVBC’s website to understand the registration and labour mobility eligibility requirements before completing and filing this form. (www.cvbc.ca, on the “For Veterinarians” menu).

Instructions:

- Read the questions carefully and complete this application form fully and precisely. Omissions or inaccuracies in your application may require resubmissions. If the space provided to respond to any question is insufficient, please attach additional pages as needed.
- The application form must be completed by the applicant, then declared before and witnessed by a notary public or commissioner of oaths.
- “Official Copies”: All supporting documents must be provided to the CVBC either: as originals; as copies that are ‘certified true’ by a notary public in Canada; or sent directly to the CVBC by the issuing body
- Certified copies of diplomas/transcripts are valid for up to 1 year, but all other components of an application (the notarized application form, copies of all other supporting documents, and letters of standing from other jurisdictions) must not pre-date the CVBC’s receipt of your application package by more than **one month**.
- Any documents that are not in English must be accompanied by a certified English translation
- The completed and notarized application form plus official copies of all supporting documents can be scanned and submitted electronically to the CVBC office by email at registration@cvbc.ca, or they may be couriered/posted to the CVBC office to the attention of the Registration Department.

College of Veterinarians of British Columbia
#210 – 10991 Shellbridge Way
Richmond, BC V6X 3C6

- Once your application has been received, you will receive a link to your invoice for the CVBC’s Application for Registration Fee plus the Bylaw Exam Fee (if applicable). You may pay the fee online by credit card or e-transfer, or you may submit a cheque or money order to the CVBC office made payable to “College of Veterinarians of British Columbia” (include reference to the Invoice number/applicant name). **Payment must be in Canadian funds.**

The CVBC will only consider an application ‘active’ when the office has received **both** the signed & witnessed application form and payment of the application fee. Once an application is initiated, the application fee is non-refundable. Applications are considered **valid for one year** from date of submission. After one year, if progress is not being made on the applicant’s part to complete the application, the application will be considered abandoned and the file will be closed; any future effort to become registered will require a completely new application (forms, documents, fees).

Each application is reviewed on a case-by-case basis and the Registrar retains the right to request additional information, re-submissions and/or updates of any outdated materials/information. If an applicant is asked to resubmit any part of an active application, the application fee will not be charged again.

Please see the Registration Application Guide on the CVBC’s website for submission checklists (specific to your selected class of registration) to assist you in gathering your supporting documents.

Attach a
current
(within last 3
months)
'passport-
style' photo

Applicant Details:

Name: (Provide your full legal name as it appears on your government-issued identification)

First name	Middle Name(s)	Last Name
Preferred Name	Preferred Identifiers/Pronouns	Birth Date

Contact Information:

Street Address	
City	Province/State
Country	Postal/Zip Code
Phone Number (mobile preferred)	Email Address (this will be the CVBC's <u>primary method of contact for all purposes</u> , and will also be your username for your CVBC online account)

Verification of Identity:

I include the following 2 pieces of current government-issued identification (at least one must include your photo):

Driver's License

Provincial/State ID card

Passport

Other: _____

(Note: Social Insurance Number (SIN) cards are not acceptable pieces of identification)

You must provide certified true copies (by a notary public in Canada)

To the Registrar of the College of Veterinarians of British Columbia, I hereby make application for registration in the following class of registration: (mark one only)

See the "Registration Application Guide" for more information about the criteria for and privileges of the different classes of registration

Private Practice

Specialty Private Practice (for ABVS/EBVS-board certified diplomates only)

Area of Specialty: _____

Certifying Body: _____

Public Sector (for veterinarians employed by federal/provincial government only)

Employer: _____

Temporary (only for veterinarians registered in another jurisdiction; only for 30 days practice in one year)

*Please indicate whether you are seeking Temporary registration based upon Private Practice or Specialty Private Practice registration criteria:

Private Practice

Specialty Private Practice (Specialty: _____)

Note: if you are seeking **Provisional Supervised Active (PSA)** registration in the Private Practice class pending your completion of the national examinations and receipt of a Certificate of Qualification from the National Examining Board (NEB), please select "Private Practice"; there will be opportunity later in the form (Question #4) to indicate that this is an application for PSA registration

I declare the following information to be true, accurate and complete:**1. My legal status in Canada is (mark only one):**

Canadian Citizen

Permanent Resident

Canadian work permit allowing me to work as a veterinarian in Canada

Other: _____

*You must provide a copy of official proof of the above, 'certified true' by a notary public in Canada.***2. I graduated with a degree/diploma in veterinary medicine from:**

Veterinary School Name: _____ Location: _____

Month/Year Awarded: _____ Degree/Credentials Awarded: _____

*You must provide official proof of your veterinary degree in the form of either a diploma, a transcript or letter of degree confirmation that includes relevant details (your name, issuing body, degree conferred, date awarded), either as a certified-in-Canada true copy or as originals sent directly to the CVBC by the issuing body; the CVBC may also accept copies forwarded directly from the files of other regulatory or accrediting organizations.***3. English Language Proficiency (ELP) – please indicate which of the following applies:**

I am a graduate of a veterinary school that provided instruction in English

My veterinary school instruction was not provided in English – *You will be required to demonstrate English language proficiency according to the CVBC's bylaws and policies (see Registration Application Guide on CVBC website)*

I will provide proof of the following current ELP assessment:

TOEFL-iBT

IELTS (Academic)

CAEL

I ask the Registration Committee to consider alternative evidence of my proficiency in English

4. I have received a Certificate of Qualification (CQ) from the National Examining Board (NEB) of the Canadian Veterinary Medical Association (CVMA):

Yes, it was issued on (date): _____

*The CVBC may ask you to arrange for the NEB to provide a copy of your CQ to ensure our records are complete*No, not yet. I am a registered candidate of the National Examining Board (NEB) and I have successfully completed (at least) the Basic and Clinical Sciences Exam (BCSE) and the North American Veterinary Licensing Exam (NAVLE). I am requesting **Provisional Supervised Active (PSA)** registration in the Private Practice class;

NEB Candidate Number: _____

No, but I am a Board-certified Diplomate applying for **Specialty Private Practice** or **Temporary** registration.*You will need to arrange for your certifying body to provide a current letter of standing (to be submitted directly to the CVBC)*No, but I am a government-employed veterinarian applying for **Public Sector** registration.

Employer: _____

Position: _____

You will need to provide a copy of your current government employment contract

5. Name changes and/or variations:

Registration is issued in an applicant's legal name as it appears on their current Canadian government-issued identification/proof of status to work in Canada, and registrants must practice under their name as it appears in the CVBC register.

If any supporting documents bear a different version of the applicant's name, then legal proof of the name change or a sworn affidavit explaining the variations must be provided.

I have legally changed my name. My former name was: _____

& I provide the following proof of the change: _____

Some of my documents are issued in the following variation(s) of my legal name:

& I will provide a sworn affidavit regarding the variations.

6. Opportunity to Declare Specialist Certifications

Any veterinarian who is a board-certified specialist must register their certification(s) with the CVBC before they may advertise themselves as a specialist in BC, regardless of which class of registration they are applying for.

I hold Diplomate status and wish to register my status with the CVBC so that I may advertise my specialist qualifications (as required by the CVBC's bylaws).

I am a specialist in: _____,

I received my certification in (year): _____, and

My ABVS/EBVS-recognized certifying body is: _____

You must arrange for your certifying body to provide a current letter of standing and credential verification directly to the CVBC.

No, I do not hold Diplomate status with an ABVS- or EBVS-recognized specialty college.

7. Intended place(s) of employment (once registered with the CVBC)

Veterinary services in BC must only be provided at/through CVBC-accredited practices/practice facilities.

Registrants are required to provide the CVBC with the name of their employer/any BC practice where they regularly practise veterinary medicine. If a registrant works in a 'locum' capacity then they may identify themselves as a locum. If a locum doesn't have any regular/recurring places of practice, then they are not required to provide any specific business information.

Employment information must be kept up-to-date and can be updated at any time directly through your online CVBC account.

Name of Practice Facility/Other Place of Employment as a Veterinarian in BC:

- _____
- *If you have secured an offer of employment, please provide the practice/facility name (or other non-clinical place of veterinary employment).*
 - *If you intend to work as a locum, you may indicate that*
 - *If you do not yet have a position secured, you may write "pending"*

8. Online Registry – Publication Permissions

The CVBC is required to maintain an Online Registry that provides registration details of all active and recently-former registrants, but must receive permission from a registrant to include their BC-based business information within their entry in the Online Registry. If you do not agree to publish your business information, it may hamper your dealings with wholesalers and pharmacies. The exemption is intended to accommodate veterinarians that have home-based mobile practices or who shouldn't be directly accessible to the general public (eg. veterinarians employed in non-clinical environments). Otherwise, it is generally in everyone's best interest to have a veterinarian's name associated with their practice facility(s) in the Online Registry.

I give the CVBC the following permission for publication of my BC work information (Choose one):

All business information (business/practice facility name, phone number, address)

Partial business information (business/practice facility name, phone number, city, but not street address)

No business information (your business/practice facility information will not appear within your entry in the Online Registry, nor will your name appear in the list of veterinarians provided with the practice facility's entry in the online facility registry)

Demonstration of Character & Fitness to Practice:**9. My paid or volunteer employment history (veterinary or otherwise) for the past five (5) years is as follows:**

- a. Business Name: _____ Location (jurisdiction): _____
Job Title: _____ From (month/year): _____ To (month/year): _____
Average Hours Worked per Week: _____ Employer/Supervisor Name: _____
Employer/Supervisor Contact Information (phone/email): _____
Description of Employment: _____
- b. Business Name: _____ Location (jurisdiction): _____
Job Title: _____ From (month/year): _____ To (month/year): _____
Average Hours Worked per Week: _____ Employer/Supervisor Name: _____
Employer/Supervisor Contact Information (phone/email): _____
Description of Employment: _____
- c. Business Name: _____ Location (jurisdiction): _____
Job Title: _____ From (month/year): _____ To (month/year): _____
Average Hours Worked per Week: _____ Employer/Supervisor Name: _____
Employer/Supervisor Contact Information (phone/email): _____
Description of Employment: _____
- d. Business Name: _____ Location (jurisdiction): _____
Job Title: _____ From (month/year): _____ To (month/year): _____
Average Hours Worked per Week: _____ Employer/Supervisor Name: _____
Employer/Supervisor Contact Information (phone/email): _____
Description of Employment: _____

Attach additional pages if necessary.

The CVBC may reach out to veterinarian employers/supervisors directly for references. These references will be included with the rest of the application materials presented to the Registrar or the Registration Committee for a registration decision.

10. I have practised and/or been licensed to practise veterinary medicine or another regulated profession in the following jurisdictions (within and outside of Canada):

New veterinary school graduates must list any jurisdiction in which they held student licensure with the jurisdiction's regulatory body.

The CVBC will require you to arrange for a letter of standing from each jurisdiction listed (or verification that licensure was not required).

a. Regulatory Body: _____ Jurisdiction: _____
 Type/Class of License: _____ License #: _____
 Dates of Licensure – From (mm/yy): _____ To (mm/yy): _____
 Actual time practising in this jurisdiction (months and/or years): _____
 Scope of practice (Species, services offered, etc): _____

b. Regulatory Body: _____ Jurisdiction: _____
 Type/Class of License: _____ License #: _____
 Dates of Licensure – From (mm/yy): _____ To (mm/yy): _____
 Actual time practising in this jurisdiction (months and/or years): _____
 Scope of practice (Species, services offered, etc): _____

c. Regulatory Body: _____ Jurisdiction: _____
 Type/Class of License: _____ License #: _____
 Dates of Licensure – From (mm/yy): _____ To (mm/yy): _____
 Actual time practising in this jurisdiction (months and/or years): _____
 Scope of practice (Species, services offered, etc): _____

Attach additional pages if necessary

11. QUESTION: To your knowledge, while attending at a post-secondary institution, have allegations of misconduct, including but not limited to academic misconduct, ever been made against you or have you ever been suspended, required to withdraw, expelled or penalized by a post-secondary institution for misconduct?

Yes *(Please attach a separate sheet providing details of the allegations, suspension, expulsion or penalty imposed upon you)*

No

12. QUESTION: To your knowledge, are you presently subject to an investigation, review or other proceeding by a regulatory body in British Columbia or any other jurisdiction?

Yes *(Please attach a full written explanation of the circumstances)*

No

13. **QUESTION:** To your knowledge, has your entitlement to practise as a veterinarian or in another profession ever been cancelled or suspended by a regulatory body in British Columbia or any other jurisdiction?

Yes *(Please attach a full written explanation of the circumstances)*

No

14. **QUESTION:** To your knowledge, have you voluntarily relinquished your entitlement to practise as a veterinarian or in another profession in British Columbia or any other jurisdiction in circumstances that may have prevented the commencement or completion of an investigation, review or other proceeding by the relevant regulatory body that could have resulted in your entitlement to practise in that jurisdiction being suspended or cancelled?

Yes *(Please attach a full written explanation of the circumstances)*

No

15. **QUESTION:** To your knowledge, have you ever been charged or convicted of an offence, where the nature of the offence or the circumstances under which it was committed could give rise to concerns about your character, competence or fitness to practise as a veterinarian?

Yes *(Please attach a full written explanation of the circumstances)*

No

16. **QUESTION:** To your knowledge, are there any circumstances that could give rise to concerns that you are not competent to practise veterinary medicine?

Yes *(Please attach a full written explanation of the circumstances)*

No

17. **QUESTION:** To your knowledge, are or may you be suffering from a physical or mental ailment, emotional disturbance or an addiction to alcohol or drugs that impairs your ability to practise veterinary medicine?

Yes *(Please attach a full written explanation of the circumstances)*

No

18. **QUESTION:** To your knowledge, are you seeking to be registered in B.C. under provisions of the *Labour Mobility Act* but are not/may not actually be entitled to be registered pursuant to that Act?

Yes *(Please attach a full written explanation of the circumstances)*

No

19. **QUESTION:** Are you aware of any other matters that might be relevant to the Registrar's or the Registration Committee's consideration of your application for registration?

Yes *(Please attach a full written explanation of the circumstances)*

No

To be sworn before an official witness (Notary Public or Commissioner of Oaths):

I, _____, do solemnly declare that:
Applicant Full Name

1. I am the applicant described in this application for registration;
2. I have personal knowledge of the information I have provided in this application;
3. The information provided is true, accurate and complete;
4. I undertake to promptly inform the CVBC of any material change to the information provided in this application; and
5. If I am granted registration by the CVBC, I undertake to act in accordance with the BC *Veterinarians Act* and the CVBC bylaws and standards.

I make this solemn declaration conscientiously believing it to be true and knowing that it has the same legal force and effect as if made under oath.

Applicant Signature: _____

Date: _____

To be completed by Official Witness (Notary Public or Commissioner of Oaths):

Declared before me in _____, in the Province/State/Country of _____,
municipality

this _____ day of _____, 20_____.
Date Month Year

Name: _____

Signature: _____

Notary Public / Commissioner of Oaths in and for: _____
(circle one) Jurisdiction

Affix or Apply
Seal/Stamp

Authorizations

1. I authorize the Registrar of the College of Veterinarians of British Columbia (CVBC) to obtain a copy of my transcripts and diploma from my veterinary educational institution or (if applicable) from the National Examining Board (NEB) or the American Association of Veterinary State Boards (AAVSB).
2. I authorize the Registrar of the CVBC to request information on past, present or contemplated investigations or inquiries by my veterinary educational institution regarding my conduct during the period of my veterinary studies.
3. I authorize the Registrar of the CVBC to obtain a criminal record check from Canadian authorities and from other jurisdictions where I have resided or held licensure.
4. I authorize the Registrar of the CVBC to obtain information from any other regulatory body concerning current or past professional licensure or registration, including particulars about complaint investigations (whether dismissed or leading to a consent resolution) and disciplinary or remedial actions.
5. I authorize those agencies, bodies or individuals possessing the information described above to provide it upon request to the Registrar of the CVBC, including without limitation, law enforcement agencies.

Applicant Name: _____

Applicant Signature: _____

Date: _____



College of Veterinarians of British Columbia

UNDERTAKING FOR SPECIALTY PRIVATE PRACTICE

Registration with the College of Veterinarians of British Columbia in the Specialty Private Practice (SPP) class does not require the applicant to have a Certificate of Qualification (CQ) from the National Examining Board. In lieu of a CQ, the applicant must be a specialist certified by a specialty college recognized by either the American Board of Veterinary Specialties (ABVS) or the European Board of Veterinary Specialisation (EBVS). An SPP registrant's scope of practice in BC must be restricted to their certified area of specialty.

In addition to providing proof of their specialist certification and current good standing with their certifying specialty college, an applicant for SPP registration must provide an undertaking to the CVBC agreeing to restrict their practice of veterinary medicine to the scope of their specialist certification.

I, _____, provide the following undertaking to the College of Veterinarians of British Columbia (CVBC), pursuant to section 2.14 of the CVBC Bylaws:

If granted Specialty Private Practice registration, I will restrict my practice of veterinary medicine in British Columbia to the scope of my board-certified area(s) of specialty (verification of certification has been provided to the CVBC).

Area of Specialty: _____

I will promptly notify the CVBC of any changes to my status as a specialist and/or with my certifying specialty college.

I understand that a breach of this undertaking may result in disciplinary consequences.

Applicant Signature: _____

Date: _____



College of Veterinarians of British Columbia

UNDERTAKING FOR PROVISIONAL SUPERVISED REGISTRATION IN THE PRIVATE PRACTICE CLASS

Provisional Supervised Registration with the College of Veterinarians of British Columbia in the Private Practice class ('PSA Registrant') may be granted to veterinarians who are registered candidates with the National Examining Board but do not yet have a Certificate of Qualification from the NEB because they must still complete the Clinical Proficiency Exams (+/- the Presurgical Assessment). Successful applicants will be provisionally registered with the CVBC but are required to always practice under the direct supervision of an approved supervisor. The Registration Committee's approval for PSA registration is only for 2 years.

An applicant for PSA registration must provide a signed undertaking to the CVBC agreeing to comply with the terms and conditions of their PSA registration.

I, _____, provide the following undertaking to the College of Veterinarians of British Columbia (CVBC), pursuant to section 2.8A of the CVBC Bylaws:

I declare that I have read, understand and will comply with the *Veterinarians Act*, the bylaws and all applicable practice standards of the CVBC.

As a PSA registrant,

I will maintain my status as an active candidate with the National Examining Board and understand that, should I cease to be a candidate with the NEB, my Provisional Supervised registration with the CVBC will also terminate.

I will only practice as a veterinarian in BC under the direct supervision of a CVBC-approved supervisor. I understand that if I do not have an approved supervisor or an approved supervisor is not available to provide direct supervision, I must not engage in the practice of veterinary medicine.

I will notify the CVBC immediately of any change to my status with the NEB

I will notify the CVBC immediately of any change to the details of my practice situation/supervision arrangements.

I understand that any breach of this undertaking may result in disciplinary consequences by the CVBC.

Applicant Signature: _____

Date: _____



College of Veterinarians of British Columbia

UNDERTAKING FOR PUBLIC SECTOR

Registration with the College of Veterinarians of British Columbia in the Public Sector (PS) class does not require the applicant to have a Certificate of Qualification (CQ) from the National Examining Board. In lieu of a CQ, the applicant must possess a contract for employment as a veterinarian in BC with either the Crown in right of Canada or by the Province of British Columbia, or other similar employment within the public sector.

In addition to providing proof of their employment contract, an applicant for PS registration must provide an undertaking to the CVBC agreeing to restrict their practice of veterinary medicine to the scope & duration of their employment contract.

I, _____, provide the following undertaking to the College of Veterinarians of British Columbia (CVBC), pursuant to section 2.14 of the CVBC Bylaws:

If granted Public Sector registration, I will restrict my practice of veterinary medicine in British Columbia to the scope and duration of my employment contract with the provincial or federal government (or similar), as provided to the CVBC with my application for registration.

Position: _____

Employer: _____

Dates/duration of contracted employment: _____

I will promptly notify the CVBC of any changes to my employment with the provincial or federal government (or similar), upon which my registration was granted.

I understand that a breach of this undertaking may result in disciplinary consequences.

Applicant Signature: _____

Date: _____



College of Veterinarians of British Columbia

UNDERTAKING FOR TEMPORARY REGISTRATION FOR EXTERNAL LICENSED VETERINARIANS

Registration with the College of Veterinarians of British Columbia in the Temporary (TEMP) class, granting the bearer 30 days of practice in BC over a one-year registration period, is only available to veterinarians who hold current and equivalent registration in another Canadian jurisdiction or other foreign jurisdiction recognized by the Registrar. Applicants for TEMP registration are not required to complete the Bylaw & Ethics Seminar and Examination but must otherwise satisfy the registration requirements for *either* Private Practice (PP) or Specialty Private Practice (SPP) registration. In lieu of the Bylaw & Ethics Seminar and Exam, TEMP applicants are required to independently review the BC *Veterinarians Act*, and the CVBC's bylaws and standards.

An applicant for TEMP registration must provide a signed undertaking to the CVBC agreeing to restrict their practice of veterinary medicine in BC to a maximum of 30 days of practice for each period of TEMP registration (maximum of one year)

I, _____, provide the following undertaking to the College of Veterinarians of British Columbia (CVBC), pursuant to section 2.15 of the CVBC Bylaws:

I declare that I have read, understand and will comply with the *Veterinarians Act*, the bylaws and all applicable practice standards of the CVBC.

I will restrict my practice of veterinary medicine in British Columbia to the scope of activity for the following class of registration for which I have demonstrated my eligibility (*please mark one only*):

Private Practice

Specialty Private Practice (*SPP Undertaking also required*)

Area of Specialty: _____

I will restrict my temporary practice to a maximum of 30 days of practice (consecutive or non-consecutive) during the period of registration (maximum duration: 1 year), in accordance with s. 2.15(4).

I will maintain full equivalent registration in another recognized jurisdiction at all times when practising as a TEMP registrant in BC.

I will maintain a log recording the details of each day of practice in BC as a TEMP registrant (dates of practice & CVBC-accredited practice facility where practice occurred) and will provide a copy to the Registrar upon request.

I understand that any breach of this undertaking may result in disciplinary consequences by the CVBC.

Applicant Signature: _____

Date: _____