

# New graduate registration application

Veterinary Practitioners Registration Board of Victoria



## DATE OF REGISTRATION IN VICTORIA

Date you plan to start practising

**NOTE:** the earliest date you can be registered is the date your University awards your degree (NOT the date you complete your studies). Please lodge your application at least 2 weeks before the date the University will be awarding your degree. If you are lodging a late application, please authorise fast track processing below.

Fast track service  I will pay the extra service fee to have my application processed outside standard timeframes. I understand that the Board cannot guarantee registration by a specified date.

## YOUR PERSONAL INFORMATION

Title	Family name			
First name	Middle name(s)			
Date of birth	Gender			
Email address				
Mobile telephone				
Victorian residential street address	<i>If not yet known, write 'Address to be advised'</i>			
Suburb / Town	State	Postcode		
Mailing address (if different from residential)				
Suburb / Town	State	Postcode		

**IMPORTANT:** Under s19 of the *Veterinary Practice Act 1997* you must notify the Board of any change of address within **28 days**.

## YOUR PRACTICE / WORK INFORMATION

Primary field of practice				
Name of practice/work	<i>If not yet known, write 'No register address'</i>			
Practice street address				
Suburb / Town	State	Postcode		
Work telephone	Work email			
Languages you speak other than English				

### BOARD USE ONLY

Date	Start date	Vic addr	Stat dec	Degree	ID	CV	Fee/OOS	Reg#
	Notes / Approval							

## YOUR VETERINARY QUALIFICATION

Australian and New Zealand graduates			
Degree/s			
University			
Year awarded			
International graduates			
Degree			
University			
Year awarded			
NAVLE	<input type="checkbox"/> Yes <input type="checkbox"/> No	Year NAVLE taken	

## PERSONAL INFORMATION PRIVACY

➔ **The Veterinary Practitioners Registration Board of Victoria is committed to complying with the Privacy and Data Protection Act 2014. For information about our privacy practices, see our [Privacy and Data Protection Policy](#)**

### ➔ Acknowledgement of collection and use of information

**Please read the following statements and complete the acknowledgement below:**

- The information I have provided to the Veterinary Practitioners Registration Board of Victoria (the Board) is collected by the Board and/or its delegates to fulfil their functions, duties and powers under the *Veterinary Practice Act 1997* (the Act).
- Under section 16(1) of the Act, the Board must keep a register of all veterinary practitioners to whom the Board has granted registration. This register is known as the Register of Veterinary Practitioners (the Register). My particulars, and those of other veterinary practitioners, are kept on the Register as authorised under section 16(3) of the Act.
- Under sections 16(4) and (5) of the Act, the Register can be inspected at the office of the Board by any person during ordinary office hours, and a person may obtain a copy of or an extract from the Register.
- Under section 16(7) of the Act, the Board may give Register particulars to an interstate veterinary registration authority for the purposes of enabling that authority to administer or execute the law under which that authority confers or grants a right to carry on or engage in veterinary practice.
- The Board will give my particulars from the public Register to the Australasian Veterinary Boards Council Inc. for the purposes of maintaining an electronic National Database of registered veterinary practitioners.
- Extracts from the public Register can be viewed on the Board's website on the [Search for a vet page](#).

### ➔ Consent to use and disclosure of information

I consent to the Board collecting and using my personal information in accordance with the Board's [Privacy and Data Protection Policy](#)

[If you have given the Board information about languages others than English that you speak]: I consent to the Board making public the information I have provided about the languages other than English that I speak.

## PAYMENT DETAILS

### ➔ For security, please print and *handwrite* payment information

Amount	AUD\$
Payment method	<input type="checkbox"/> VISA <input type="checkbox"/> Mastercard <input type="checkbox"/> Cheque/Money order
Name on credit card	
Credit card number	
Expiry date	
Signature of card holder	

### Checklist and supporting documents

I have completed all relevant sections of this form.

I have attached the following supporting documents:

Statutory declaration (last page) – printed, completed and signed in front of a person authorised to witness documents

Copy of photographic identification certified by person authorised to witness documents

If applicable, certified change of name documentation. For example, if you are registering under a different name than the name on your photographic identification or degree certificate

Copy of degree testamur shared and authenticated via [MyEquals](#) (or certified by authorised person and emailed as PDF).  
**Students not yet awarded your degree certificate:** if your veterinary school has sent the Board a list of graduating students which includes your name, we will be able to register you on the day after the University awards your degree. However, you must still provide us with a copy of your degree certificate as soon as you receive it.

If applicable, copy of other necessary qualification, e.g. NAVLE, NVE

Personal resumé (CV) covering all your education, work and veterinary activities up to now. Include your place of birth, and your places of primary, secondary and tertiary education. If English is not your primary language, include a section detailing your English education.

**I understand and acknowledge that:**

the Board may not accept my application if it is incomplete and/or I do not provide all documents requested by the Board

the Board may validate documents provided with this application as evidence of my identity or qualifications

### Lodge your application by email, post or in person

Email to [communications@vetboard.vic.gov.au](mailto:communications@vetboard.vic.gov.au) – email all documents as PDF files, NOT image/photo files.

Post or deliver to    Veterinary Practitioners Registration Board of Victoria  
Level 14, 10-16 Queen Street  
Melbourne VIC 3000

### Next steps

After you lodge your application:

1. We will check your information and documents to see if you qualify for registration. We may contact you if we need more information or documents from you.
2. If you qualify for registration and we do not need more information from you, we will email you to confirm we have received your application and tell you when the Board will be deciding on your registration.

### Feedback on this form

This is a new form and we would like your feedback on how easy it was to complete.

Please choose a number in the scale below: 1 means it was easy to complete and 5 means it was difficult to complete.

**EASY**

1

2

3

4

**DIFFICULT**

5

We welcome your comments or suggestions here:

**PLEASE PRINT, COMPLETE AND RETURN  
THE STATUTORY DECLARATION ON THE NEXT PAGE**

# STATUTORY DECLARATION TO BE WITNESSED BY AUTHORISED PERSON

➔ Read the following statements carefully. Tick (✓) every statement that is true and correct for you. You must not tick a statement if it is not true and correct in your case. If there is a statement you cannot tick, please explain why you have not ticked it in the 'Additional statement' field.

You must sign and complete this declaration in front of an authorised person. You will find a list of authorised persons in [section 107A of the Evidence \(Miscellaneous Provisions\) Act 1958 Victoria](#). If you are in another country, any person or agency recognised by the law of that country as being able to certify documents should be able to witness the statutory declaration.

## I declare:

- |                          |  |
|--------------------------|--|
| <input type="checkbox"/> | I am the person named in this application and the information that I have provided to support my application is true and correct.  |
| <input type="checkbox"/> | I have never been registered as a veterinary practitioner/veterinarian in any other Australian or international jurisdiction.  |
| <input type="checkbox"/> | In the past 12 months, I have <b>NOT</b> been found guilty of any academic or professional misconduct, or any unprofessional conduct.  |
| <input type="checkbox"/> | In the past 12 months, I have <b>NOT</b> been subject to any disciplinary actions or proceedings (including any preliminary investigation or action that might lead to disciplinary proceedings) by any authority or body constituted to discipline veterinary surgeons/practitioners. |
| <input type="checkbox"/> | In the past 10 years, I have <b>NOT</b> been found guilty of an indictable offence in Victoria or an equivalent offence in another jurisdiction.   |
| <input type="checkbox"/> | I have <b>NEVER</b> had my registration cancelled or suspended.  |
| <input type="checkbox"/> | I have <b>NOT</b> had any special conditions placed on my registration in another jurisdiction.  |
| <input type="checkbox"/> | I do <b>NOT</b> have a physical or mental impairment, or a substance dependency (e.g. on alcohol or drugs), which would affect my ability to practise as a registered veterinary practitioner.   |
| <input type="checkbox"/> | I am fit to practise as a registered veterinary practitioner.  |
| <input type="checkbox"/> | If I am registered as a veterinary practitioner in Victoria, I will comply with the provisions of the <a href="#">Veterinary Practice Act 1997</a> and I will observe the minimum standards set out in the <a href="#">Board's Guidelines</a> .  |

**Additional statement** Explain here why you have not ticked one or more items and give extra information about those items, e.g. the outcome of disciplinary proceedings or a court case. If you need more space, attach a separate statement.

I (full name)

of (residential address)

acknowledge that this declaration is true and correct, and I make it with the understanding and belief that a person who makes a false declaration is liable to the penalties of perjury.

Signature of applicant

Declared at address

On date

before me (full name of authorised witness)

Signature of authorised witness

Address of authorised witness

Title of authorised witness