

VETERINARY TECHNICIAN 2011 EXAM SCHEDULE

Veterinary Technician National Examination (VTNE)*

November 15 – December 15, 2010 <i>Deadline: October 15, 2010</i>	March 1 – March 31, 2011 <i>Deadline: February 1, 2011</i>
Prometric Testing Centers U.S. & Canada Time & Place to be scheduled by AAVSB	Prometric Testing Centers U.S. & Canada Time & Place to be scheduled by AAVSB

Application Fee (Mail Application and Fee to Board Office)	\$ 100.00
VTNE Exam Fee to AAVSB Office (online application)	<u>\$ 300.00</u>
Total Cost	<u>\$ 400.00</u>

APPLICANTS FOR VETERINARY TECHNICIANS LICENSE

All applicants applying for license, as a veterinary technician, in Alabama must be graduates of a school or college offering Veterinary Technology Programs either accredited by the AVMA or otherwise approved by the Board.

All applicants must take or have taken the Veterinary Technician's National Examination. If the VTNE* was taken in another state, applicant's scores must be reported to the Alabama Board Office through the American Association of Veterinary State Boards. Contact AAVSB TIVA Reporting Service, 380 W. 22nd Street, Suite 101, Kansas City MO 64108, or call toll free 877-698-8482 or regular phone 816-931-1504 or on-line at www.aavsb.org for information regarding score transfer. *Scores must be received and meet the standards of the Alabama Practice Act before an application is mailed.

All applicants will be required to take the State Board Written Jurisprudence Examination. You will be given the examination upon completion of the application file. All applicants who are interested in obtaining a license in Alabama should correspond in writing to the Board office.



**ALABAMA STATE BOARD OF
VETERINARY MEDICAL EXAMINERS**
8 COMMERCE STREET – SUITE 910
MONTGOMERY, ALABAMA 36130-5330
334/262-8068
FAX: 334/262-8716

ATTACH
PHOTO
HERE

**APPLICATION FOR EXAMINATION and/or LICENSING
(VETERINARY TECHNICIAN NATIONAL EXAMINATION and/or STATE BOARDS)**

Full Name*:		
*Name desired on License <i>(If different from Full Name Listing)</i>		
Mailing Address:		
City:	State:	Zip:
Phone #:	Fax #:	
Work Address:		
City:	State:	Zip:
Work Phone#:	Work Fax#:	
Cell #:	Date of Birth:	
E-mail address:	Social Security #:	

I am currently enrolled as a senior student or a graduate student of an AVMA accredited program in veterinary technology at _____ (School/College).

Date of or anticipated date of graduation is/was _____ (month, day), 20____.

Date: _____ Applicant's Legal Signature: _____

**Two (2) Photos are required when applying for the VTNE.
Attach both pictures to the completed application.**

APPLICATION FEE IS \$100.00

Check or Money Order Payable to:

Alabama State Board of Veterinary Medical Examiners or ASBVME.

***** APPLICATION & EXAM FEES ARE NON-REFUNDABLE *****

Attach Two (2) Current Photos to Page One (1) Of This Application

THE FOLLOWING QUESTIONS ARE TO BE ANSWERED BY THE APPLICANT

1. Are you licensed to practice in any other State or County? Yes No If Yes, list them and give date license was granted. _____

(FORWARD LICENSE VERIFICATIONS TO THE ALABAMA BOARD)

2. Has any license or authorization to practice as a veterinary technician ever been revoked, suspended or disciplined in any manner? Yes No If Yes, give details, _____

3. Have you ever been charged, convicted of a crime or pleaded nolo contendere or non vult to a criminal or civil charge? Yes No If Yes, give details _____

4. Have you ever been treated for or are you now being treated for, voluntarily or involuntarily, for alcohol or substance abuse? Yes No If Yes, give details, _____

5. Are you presently engaged in any type of veterinary technician endeavor, either as a principal or as an assistant? Yes No If Yes, give details _____

6. **I am a citizen of the United States.** **I am not a citizen of the United States.**
If not a U. S. citizen, explain current residential status & provide copy of immigration status card or paperwork.

7. I have received, read and understand the provisions of the Alabama Veterinary Practice Act and its Administrative Code. Yes No

(Copy Act & Rules at Board Website www.asbvme.alabama.gov)

8. I am eligible and want to take the State Board Written Examination. Yes No

9. I authorize correspondence and exam scores by Email! Yes No

Legal Signature: _____ **Date:** _____

VETERINARY TECHNICIAN LICENSE VERIFICATION

APPLICANT AUTHORIZATION:

NAME: _____ LICENSE #: _____

ADDRESS: _____

I authorize the release of information to the Alabama State Board of Veterinary Medical Examiners in regards to the status and standing of my license to practice as a Veterinary Technician in the State of _____ (state).

Applicant Signature _____ Date: _____

BOARD VERIFICATION:

APPLICANT LICENSE NUMBER: _____ DATE ISSUED: _____

Qualifications for license in year of issue (i.e., exams, experience, etc.): _____

Current License Status (i.e., active, inactive, lapsed, etc.): _____

Disciplinary Action? _____ No _____ Yes

Current Disciplinary Action? _____ No _____ Yes

Pending Disciplinary Action? _____ No _____ Yes

If yes to any disciplinary action, please find attached a certified copy of the Findings of Fact, Conclusions of Law, and/or Final Order, or the charges of a pending case.

Board Signature: _____ Date: _____

Executive Officer

Board Seal

Mail directly to: Alabama State Board of Veterinary Medical Examiners
8 Commerce Street – Suite 910
Montgomery, AL 36130-5330

*Makes copies as needed! Send directly to the State Board from which you request verification.
All licenses must be verified regardless of status!*