

# APPLICATION FOR VETERINARY TECHNICIAN NATIONAL EXAMINATION

Completed application must be in the Board office by 5:00pm the day of the deadline. Application and/or fee are not refundable or applicable to future examinations.

Disclosure of information is voluntary. Failure to comply may result in this application not being processed. Should any contact information of the applicant change it is their responsibility to request in writing to the Board office changes be made to their file. Applicant must be within 4 months of graduation or already graduated to be eligible to sit for the June VTNE date. January VTNE date is for those applicants who have already graduated. Check or money order in the amount of \$230.00 must be submitted with application form. Passing score for exam is 425. The Board office provides status letter by mail until applicant's file is complete, each letter should be read carefully. The status letter is sent to keep applicants updated on which documents have arrived in the Board office. When the file is complete a final letter is sent. File must be completed seven days before the examination date or the applicant will not be eligible for examination. A study guide is available from AAVSB.org <http://www.aavsb.org/TIVA/CandidateInformationBooklet.pdf>

Follow the directions on the application form. In addition, note the following:

1. Completed application must be in the Board office by 5:00pm the day of the deadline.
2. Submitted with application copy of social security card. Disclosure is mandatory by N.C.G.S. § 110-142, *et. seq.*
3. If the name shown on supporting documents is different from that shown on your application, submit proof of legal name change by copy of marriage license, divorce decree, affidavit or court order.
4. Submitted with application one passport photo taken within six months of date of filing. No digital or personal pictures.
5. Submitted with application check or money order, payable to the North Carolina Veterinary Medical Board (NCVMB).
6. If NOT graduated a Dean's letter must be sent to Board office from school/college of intended graduation date.
7. If graduated a degree conferred transcript on file with Board office. Sent directly from school/college.
8. If application is not completed or required documents not submitted, application will be returned and applicant may not be eligible for examination date.
9. Once check in for an exam has been completed, the examination area is closed and no one will be able to enter.

### **Applicants with disabilities:**

Applicants requesting special accommodations for the VTNE must provide in writing at time of application all information concerning the disabilities and state what accommodations are being requested. The applicant is responsible for submission of documents by VTNE application deadline. If the Board office has not received the requested documentation a delay could occur. Such as, you may not be able to sit for the requested VTNE.

Required Information regarding ADA Accommodations:

1. When disability was professionally diagnosed? Name of Professional /Doctor, A letter and supporting information will be required from the professional/Doctor who made the diagnosis.
2. Did you receive any accommodations not relating to testing in high school? In college? If yes please describe.
3. Did you receive any accommodations for the college admission test? If yes please describe.
4. How is the recommendation for accommodations related to the disabilities given that the VTNE is largely multiple choice exam.

# North Carolina Veterinary Medical Board

## Application for Veterinary Technician National Examination

To mail an application use P. O. Box 37549, Raleigh, NC 27627  
To overnight an application due to time constrain use 1611 Jones Franklin Road,  
Suite 106, Raleigh NC 27606  
(919) 854-5601

- Completed application must be in the Board office by 5:00pm the day of the deadline. Application/fee is not refundable or transferable.
- Applicant must be within 4 months of graduation or graduated to be eligible to sit for the June VTNE date. January VTNE date is for applicants who have already graduated.
- If application is not completed it will be returned. This delay may cause you not to be eligible for the examination date being requested. File must be completed seven days before the examination date or the applicant will not be eligible for exam.
- If NOT graduated a Dean's letter must be sent to Board office from school/college of intended graduation date.
- If graduated a transcript with degree conferred on file with Board office. Sent from school/college is required.
- Submitted with application copy of Social Security Card.
- Submitted with application passport photo taken within six months of date of filing. No digital/personal pictures accepted.
- If the name shown on supporting documents is different from that shown on your application proof of legal name change by copy of your marriage license, divorce decree, affidavit or court order is required.
- Fee of \$230.00 must be submitted with application. Check or money order payable to the North Carolina Veterinary Medical Board (NCVMB).

**Select Exam Date** \_\_\_\_\_ June 19, 2009 Application due in Board office by 5:00 p.m. April 17, 2009

\_\_\_\_\_ January 15, 2010 Application due in Board office by 5:00 p.m. November 16, 2009  
(Graduated Applicants only)

Have you applied for the VTNE before? [ ] YES [ ] NO If so Date \_\_\_\_\_

State \_\_\_\_\_

[ ] Pass [ ] Failed

\_\_\_\_\_  
Legal Name (First, Middle, Last)

\_\_\_\_\_  
Name(s) under which any documents will be submitted (Must provide documentation of legal name change at time of Application.)

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
City, State, Zip Code

\_\_\_\_\_  
County

\_\_\_\_\_  
(Area Code)-Telephone Number

\_\_\_\_\_  
Social Security Number

[ ] Male [ ] Female

\_\_\_\_\_  
Date of Birth (MM/DD/Year)

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Name of A.V.M.A. Accredited School/College

State/Country

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Date of (Expected) Graduation by MM/DD/Year

- \* If NOT graduated request Dean's letter to be sent from School/College of intended graduation date, is required.
- \* If graduated a degree conferred transcript on file with Board office and sent directly from School/College is required.
- \* Submitted with application copy of Social Security Card and passport photo.

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Are you requesting special accommodations for a disability under the Americans with Disabilities Act?  
Checking box does not constitute an official request.

YES     NO

If you answered "Yes" above, supply what accommodations are being requested in writing. Documentation on the nature of the disability and support information from who made the diagnosis will be required. All documents are required by N.C. VTNE application deadline.

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I understand the instructions and terms as set forth in this application form, that I have personally completed this form. The information given is true, correct, and complete to the best of my knowledge. I hereby authorize the North Carolina Veterinary Medical Board to verify any and all information contained in this application. I authorize North Carolina Veterinary Medical Board to review State files pertaining to my Registration and all law enforcement records, administrative records, and court documents to confirm the accuracy and completeness of the information provided herein. This application and signature shall act as authorization of entities in possession of applicable information to release such information to the North Carolina Veterinary Medical Board.

The Board office provides status letter by mail until applicant's file is complete, each letter should be read carefully. The status letter is sent to keep applicants updated on which documents have arrived in the Board office. When the file is complete a final letter is sent.

I also understand that I cannot by law use the terms "registered veterinary technician" or "veterinary technician" until such time that I have successfully completed all training, passed N.C. examinations, and maintain the registration with the Board.

Download and print VTNE study guide at AAVSB.Org  
(<http://www.aavsb.org/TIVA/CandidateInformationBooklet.pdf>)

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Applicant's Signature

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Date

Applicant's emergency contact number: \_\_\_\_\_