

Annex A

Training practice declaration

Signature of Training Practice Principal (Employed students only)

I, as **Training Practice Principal**, approve the submission of this application for enrolment for the applicant named above. I agree to support their training and assessment as stated below:

I recognise my obligation to ensure the applicant will:

- Complete an accredited programme of veterinary nurse education of a minimum of 2,990 hours and be placed or employed for a minimum of 1,800 hours in clinical veterinary practice with an appropriate caseload and facilities.
- ii. Be supported in practice and assessed to meet the RCVS Day One Competences for Veterinary Nurses and the RCVS Day One Skills for Veterinary Nurses.
- iii. Be provided with day-to-day supervision of their work as a student veterinary nurse both in relation to developing their competence and in accordance with the requirements of Schedule 3 of the Veterinary Surgeons Act.

Signature:	Date:	
Name (Print):	TP Number:	
Practice Name:	Practice Postcode:	



Annex B

Student Declaration

Student Declarat	<u>ion</u>									
I hereby apply to be enrolled as a student veterinary nurse. As an enrolled student veterinary nurse. I understand I will be subject to the Registration Rules of the RCVS which are applicable to veterinary nurse training. I agree to abide by the Code of Professional Conduct for Veterinary Nurses, including any updates, as published by the RCVS.										
Signature:						Dat	te:			
Name (print):										
Signature of Head of Centre I, as Head of Centre, approve the submission of this application for enrolment. Signature: Date:										
Name (print):										
		<u>!</u>	Passpo	rt Phot	to Authent	icatio	<u>on</u>			

Please copy and paste student photo here