

**Declaration by the Responsible Veterinarian in Support of the License for Veterinary Assistant Services**

We hereby confirm that the veterinary student:

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| Name:   | Born:   |
| Student at:   |    |

The student will be employed under a temporary license as a veterinary assistant under my/our supervision. I/we hereby assume full professional responsibility for the student

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| Name(s) of Responsible Veterinarian(s) (printed in capital letters)     |

|  |  |  |
| --- | --- | --- |
| Period of Employment | Start Date: | End Date: |

 Signature of all veterinarians assuming professional responsibility:

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Signature and Date:

This statement shall accompany the application for a license to practice as a veterinary assistant.