



THE VETERINARY COUNCIL OF ZAMBIA

The Veterinary and Veterinary Para-Professions (General) Regulations, 2013

APPLICATION FOR REGISTRATION FOR A LIMITED PERIOD

(Section 17 of the Veterinary and Veterinary Para-Professions Act, of 2010)

Please complete in block letters	Shaded fields for official use only	Code	
		Date/Time	
<i>Information Required</i>	<i>Information Provided</i>	√	
1. <b>Name(s) of supervising veterinary surgeon</b> (a) Surname (b) Forename (s) (c) Certificate of Registration No.	<div></div> <div></div> <div></div> <div></div> <div></div>		
2. <b>Nationality</b> - National Registration Card No. - Passport No.	<div></div> <div></div> <div></div>		
3. <b>Address</b> <b>Tel:</b> <b>Fax:</b> <b>E-mail:</b>	<div></div> <div></div> <div></div> <div></div>		
4. <b>Details of applicant</b> (a) Surname (b) Forename (s)	<div></div> <div></div>		
5. <b>Application details</b> <ul style="list-style-type: none"> <li>Type of registration</li> <li>Qualifications</li> <li>Location</li> <li>Name of animal health facility</li> </ul>	<div></div> <div></div> <div></div> <div></div>		

6.	<p><b>Supervising veterinary surgeon's declaration</b></p> <p>I, .....undertake to supervise the above-named applicant for the period of the applicant's limited registration as stated on the application form and certificate of limited registration.</p>   <p style="text-align: center;">..... Signature</p> <p>Dated this .....day of.....20.....</p>
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**FOR OFFICIAL USE ONLY**

Note

Form to be completed by applicant's supervising veterinary surgeon