



THE VETERINARY COUNCIL OF ZAMBIA

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

APPLICATION FOR CERTIFICATE OF STATUS (Section 32 of the Veterinary and Veterinary Para-Professions Act, 2010)			
Please complete in block letters	Shaded fields for official use only	Code	
		Date/Time	
Information Required			Information Provided
1.	Name(s) of applicant Surname Forename (s)		√
2.	Nationality - National Registration Card No. - Passport No.		
3.	Address Tel: Fax: E-mail:		
4.	State information sought		

Applicant's signature

Date

FOR OFFICIAL USE ONLY

Received by: _____

Officer

RECEIPT No.

Date Received _____

Amount Received _____

STAMP

Serial No. of application: _____