

**Application Fee: \$1,130**

- ☐ Credit card online
☐ Credit card mailed
☐ Check mailed

Application Status

- ☐ First Time Application
☐ Reapplication

2019 ACVS APPLICATION FOR DUAL CERTIFICATION

NAME _____ (first) (middle) (last) VETERINARY DEGREE _____

PREFERRED MAILING ADDRESS ☐ Work ☐ Home (If work, please list company name.)

PHONE Work _____ Home _____ Preferred Phone ☐ Work ☐ Home

EMAIL _____

Notification emails will be sent by October 1. Please contact ACVS with new email/contact information.

YEAR BOARD CERTIFIED BY ACVS: _____

TYPE OF CERTIFICATION RECEIVED: ☐ Board Certified in Surgery
☐ Board Certified in Large Animal Surgery
☐ Board Certified in Small Animal Surgery

SPECIES NEWLY TRAINED IN: ☐ Large Animal ☐ Small Animal

Number of years practicing in the new species: _____

WHICH OPTION TOWARD DUAL CERTIFICATION HAVE YOU PURSUED?

- ☐ Option A
☐ Option B

PREVIOUS APPLICATION(S) FOR DUAL CERTIFICATION TO ACVS ☐ Yes ☐ No

If yes, indicate year of previous application and reason for reapplication: previous refusal or recredentialing after three examination attempts.

1. _____
2. _____

False information or other evidence of fraud will nullify this application and any action of ACVS resulting there from, and will be reason for disqualification of the applicant.

Should this application result in a decision from ACVS that adversely affects the applicant, the decision may be appealed under certain circumstances. Contact the ACVS office to receive a copy of the *Protocol for Processing of Appeals*.

Signature _____