



**Application for ANNUAL PRACTISING CERTIFICATE (APC) 2012-2013** (or retention on the Register of Veterinarians)

Name:

Reg No:

Qualifications:

Registration status:

Speciality:

Conditions on practice:

Honours:

Before completing this form please read the enclosed guidance notes. If you need help, please email [vet@vetcouncil.org.nz](mailto:vet@vetcouncil.org.nz) or phone **04 473 9600**  
**Please return the completed form with payment by 29 February 2012 to be eligible for the rebated fee or by 28 March 2012 for renewal at the full fee rate. Your APC cannot be issued until we have received payment and a FULLY completed application form.**

**1. Contact Details**

Please check the details, above and below, and mark changes in clear block letters. **You must provide evidence of name changes, and certified evidence of honours and additional qualifications.**

Contact Address:

Postcode:

Email:

Practice Name:

Business Phone:

Home Phone:

Cell Phone:

Fax:

Enter changes in this column

**VETERINARY COUNCIL OF NEW ZEALAND, PO BOX 11842, WELLINGTON, PH: 04 473 9600, FAX: 04 473 8869**

Please attach this remittance with your payment and completed forms

VCNZ GST No. 13-157-603

Name:

Registration no:

**Amount Payable**      Discounted amount if payment received by 29 February 2012      \$  
                                  Full amount if payment received after 29 February 2012      \$

*Note: Non-discounted payment due no later than 28 March 2012*

**Payment Method:**    Cheque enclosed     Cheque number     **Payable to Veterinary Council of New Zealand**

Direct Credit     Date     Bank Account 02-0506-0072992-00    Include Registration No. as reference

Credit Card no. (Visa or Mastercard)     Expiry Date

Name on Card.....    Cardholders Signature.....

**Your tax invoice/receipt will be issued with the annual practising certificate.**

## 2. Intentions for 2012/13

Please tick the appropriate box

- I intend to practise in New Zealand from 1 April 2012 and hereby apply for an APC

**Go to Section 3**

- I am not intending to practise in New Zealand during the period ending 31 March 2013 but wish to remain on the Register and have enclosed the \$58.00 non practising fee

**Go to Section 6**

- I am permanently retired from practice but wish to remain on the register as non practising with no fee.

**Go to Section 6**

- I am not currently practising in New Zealand and hereby apply to have my registration put on hold

**Go to Section 8**

## 3. Recent Practice Please complete ALL parts of the question

**3.1** Have you worked as a veterinarian during the last three years?

- Yes  
 No (please refer to 3(d) of the Guidance Notes for the information required)

**3.2** During the previous year did you work in a field of activity you have never practised in or have not practised in during the last three years?

- Yes (please refer to 3(d) of the Guidance Notes for the information required)  
 No

**3.3** Are you seeking to work in a field of activity you have never practised in or have not practised in during the last three years?

- Yes (please refer to 3(d) of the Guidance Notes for the information required)  
 No

## 4. Overseas Practice. Please complete ALL parts of the question

**4.1** Have you practised outside NZ or Australia since you were last issued with an APC?

- No  
 Yes (if yes, please list the countries where you practised and arrange for a letter of good standing from each overseas jurisdiction that you have been registered with to be sent directly to the Council)

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**4.2** Have you practised in Australia since you were last issued with an APC?

- No  
 Yes (if yes, please list the Australian jurisdictions you practised in)

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Can the Council verify your good standing status with the Australian Board?

- Yes  
 No (if no, please arrange for a letter of good standing to be sent directly to the Council from the Australian Board)

## 5. Fitness to practise

Tick either 'Yes' or 'No' to **ALL** of these questions. (If Yes, please refer to 3(f) of the Guidance Notes for the information required).

Since you were last issued an APC in New Zealand, have you been subject to:

**5.1** Any investigations, in New Zealand or overseas, by an employer, or registration or professional body or educational institution or other authority (e.g. racing authority) relating to any matter that may be the subject of disciplinary proceedings?

Yes  No

**5.2** A formal competence enquiry by an employer or registration body?

Yes  No

**5.3** An adverse finding in any disciplinary actions by an employer, registration, professional body or other authority (e.g. racing authority)?

Yes  No

**5.4** A police investigation and/or guilty finding in any criminal proceeding (including traffic offences involving alcohol and/or drugs)?

Yes  No

**5.5** Any new or continuing mental or physical condition with the potential to affect your fitness to practise such as neurological, psychiatric, depressive or addictive (drugs or alcohol) disorders including physical deterioration due to injury, disease or degeneration?

No

Yes – I have previously disclosed my medical condition to the Council and this situation remains unchanged.

Yes –this is a new condition (Please refer to 3(f) of the Guidance Notes for the information required)

Can the Council's Registrar contact your treating practitioner(s) for further information?

Yes

No - I prefer the Registrar to contact me first.

Name of your treating Health Practitioner:

Contact details of your Health Practitioner:

  

## 6. Public Register Information

Your contact address, practice name, phone, fax, and email details can only be included in the published Register if you agree. Tick either Yes or No to all of these questions.

I agree to the following details being published in the public online Register:

Phone (home):  Yes  No

Email:  Yes  No

Cellphone:  Yes  No

Contact Address:  Yes  No

Phone (bus):  Yes  No

Practice name:  Yes  No

## 7. Continuing Professional Development (CPD)

Please print the number of CPD points accumulated during 2011 in each of the categories below. If no CPD has been completed enter nil. The total requirement is at least 60 points by 31 December 2013.

Note that all vets are required to retain a detailed record of CPD activities which may be required for compliance monitoring.

Continuing Vet Education (CVE)	Collegial Learning Activity (CLA)	Self Directed Learning (SDL)	Total Points
Minimum of 15 points over 3 years	Minimum of 15 points over 3 years		

## 8. Declaration

I hereby declare that:

- I am aware of and comply with Council's expectations of veterinarians as set out in the VCNZ Code of Professional Conduct
- I understand that extracts of the public Register may be provided by VCNZ to appropriate organisations from time to time
- The information I have given in this application is true and correct

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Name: \_\_\_\_\_

**That completes the APC application. Your APC cannot be issued until we have received payment and a FULLY completed application form. Please now complete the Workforce survey on the next page.**

