

## Application for Veterinary Training Programme

### Applicant Information

Miss/Ms/Mrs/Mr/Mx		Pronouns				
First Name		Surname				
Date of Birth		Personal email				
National Insurance		VN RCVS number (LVL5)				
Home Address				Postcode		
Phone number				Do you have any criminal convictions	YES	NO
Are you a British Citizen	YES	NO	If no, do you have proof of settlement	YES	NO	
<b>Next of kin information</b>						
First Name		Surname				
Relation to the learner		Phone number				
Home Address				Postcode		

### Please tick the course you are applying for

<b>Please select course and/or location</b>	<b>Year of entry</b>			
<b>Chester</b>				
Level 3 Diploma in Small Animal Veterinary Nursing	September		March	
<b>Dereham</b>				
Level 3 Diploma in Small Animal Veterinary Nursing	September		March	
<b>Online</b>				
Level 2 Certificate in Veterinary Care Support	October		April	
Level 5 Advanced Veterinary Nursing (Practice Nurse)	February			
Level 5 Advanced Veterinary Nursing (ECC)	May			

### Veterinary Practice Information

Veterinary Practice Name						
Veterinary Practice Address				Postcode		
Name of Practice Principle		Practice Principle email				
Practice Contact Number		Practice email				
Is this Practice a Training Practice (TP)? (LVL3)	YES	NO	If no, would they consider becoming a TP?	YES	NO	
If yes, please provide practice RCVS number						

### Student employment details and Clinical Supervisor (LVL3) - RVN, Mentor (LVL2) - RVN or Vet, Mentor (LVL5) RVN with Level 5 qualification or a VET

<b>Student</b>		<b>Student</b>	
Current Employment Start Date		Employed Hours per week	
Who is responsible for payment of your fees? (Non-funded students only)		Myself	Practice
Name of the Clinical supervisor (RVN) Mentor (RVN or Vet)		Clinical supervisor's / Mentor's role in the Practice	
Clinical supervisor's / Mentor's email address			

## Application for Veterinary Training Programme

### Learning difficulties / disabilities

Do you have any learning difficulties / disabilities / medical conditions?	YES		NO	
If you have answered "YES", can you please provide more details:				
List any special academic or learning support needs:				

### Ethnicity

<b>White</b>	<b>Asian / Asian British</b>
31 English / Welsh / Scottish / Northern Irish / British <input type="checkbox"/>	39 Indian <input type="checkbox"/>
32 Irish <input type="checkbox"/>	40 Pakistani <input type="checkbox"/>
33 Gypsy or Irish Traveller <input type="checkbox"/>	41 Bangladeshi <input type="checkbox"/>
34 Any other White background <input type="checkbox"/>	42 Chinese <input type="checkbox"/>
<b>Mixed / Multiple Ethnic Group</b>	43 Any other Asian Background <input type="checkbox"/>
35 White and Black Caribbean <input type="checkbox"/>	<b>Black / African / Caribbean / Black British</b>
36 White and Black African <input type="checkbox"/>	44 White – British <input type="checkbox"/>
37 White Asian <input type="checkbox"/>	45 Caribbean <input type="checkbox"/>
38 Any Other Mixed / Multiple ethnic background <input type="checkbox"/>	46 Any other Black / African / Caribbean background <input type="checkbox"/>
<b>Other Ethnic Group</b>	
47 Arab <input type="checkbox"/>	
98 Any other Ethnic Group <input type="checkbox"/>	
99 Not provided <input type="checkbox"/>	

### Qualifications

Not applicable for Level 5. Level 2 applicants, please provide Maths and English and any other animal related qualifications. Level 3 applicants, please provide Maths, English, Science and other 2 GCSE's.

Qualification ( eg: GCSE, Functional Skills)	Date taken or to be taken	Grade
Maths		
English (Language)		
Science		
Other GCSE		
Other GCSE		
Other qualifications		

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Once the application has been received, the admissions department will contact you with information about the next step of the application.

Please return completed application to: [nursingschool@cvsvets.com](mailto:nursingschool@cvsvets.com)