



2009 REGISTERED VETERINARY TECHNICIAN STATE EXAM APPLICATION

EXAM DATE: FRIDAY, JUNE 19, 2009 • AUSTIN, TX

▶ PERSONAL INFORMATION

Please print. Return this form with payment to TVMA at 8104 Exchange Dr., Austin, TX 78754 or fax to 512/452-6633 if paying by credit card. If you have questions, call TVMA at 512/452-4224.

First Name: _____ Last Name: _____ SSN: _____ DOB: ____/____/____

Clinic Name: _____

Work Address: _____ City/State: _____ Zip: _____

Home Address: _____ City/State: _____ Zip: _____

Work Phone: _____ Home Phone #: _____ E-mail: _____

All mailings are sent to the home address unless otherwise notified.

▶ INSTRUCTIONS

- Please determine your exam category and answer the respective questions.
- Please do not answer the questions for more than one category. You should only fall under one of the below categories.
- All information requested below is required. **DEADLINE: April 30, 2009. Incomplete forms will not be processed.**

▶ SELECT (ONE ONLY)

I am currently enrolled in an AVMA-accredited veterinary technology program (*see note below*).

*Date Student Will Complete Program: _____

**Reflects date that ALL course work and clinicals are completed and diploma is received.*

School and State: _____

Phone: _____

Program Director Name: _____

Program Director Signature: _____

Note: Signature indicates student has only an internship left at the time of exam to complete all program requirements. If the student has more than an internship left at the time of exam, they are not eligible to take the state exam at this time. You must submit an official final transcript.

I have never taken the National or Texas RVT exam and am a graduate of an American Veterinary Medical Association (AVMA)-accredited vet tech program. You must submit an official final transcript.

Date of Graduation: _____ School, State and Year Graduated: _____

I am a transferring registered, licensed or certified technician from another state and a graduate from an AVMA-accredited vet tech program (the program must have been accredited at the time of completion). You must submit an official transcript, a status letter from your current state and have your VTNE scores transferred to TVMA. If you previously passed the national exam in any state where it is offered, you must call the AAVSB to request transfer at 877/698-8482.

State Transferring From: _____ Registering or Licensing Agency Name: _____

School and State Graduated: _____

I have an expired registration in the state of Texas with the prior designation of ATR or RVT and graduated from an AVMA-accredited program. You must submit an official transcript if you graduated prior to 1995. If you graduated and have not taken the VTNE, you will be required to do so.

Name at the Time Registration Expired (if changed): _____ Date of Initial Exam or Year Registration Expired: _____

I took the state exam and/or VTNE previously in Texas and did not pass one or both exams. If you previously took the exam under category 1, you must provide an official transcript showing completion of your AVMA-accredited vet tech program if you did not do so previously.

Exam Failed: National State Year of Initial Exam: _____ Year Last Exam Taken: _____

School, State and Year Graduated: _____

I hereby affirm that the information provided above is true and correct to the best of my knowledge and understand that any misrepresentation could prevent me from taking the examination(s). DEADLINE: APRIL 30, 2009

Signature: _____ Date: _____

You will receive an exam information packet that will be mailed by May 15, 2009 please contact TVMA with any questions.

▶ PAYMENT

Payment must accompany application. A non-refundable application fee of \$35 and the State Exam fee of \$85. Refunds of 100% before May 1, 2009. Refunds of 50% until May 15, 2009.

Visa MC Card Number: _____ VIN #: _____ Expiration Date: ____/____/____

Name on Card: _____