

**Nova Scotia Veterinary Medical Association**  
**Application for Membership - Registered Veterinary Technologist**  
**2018-2019**

**Instructions:**

Complete all sections of the three-page application in type or print.  
Legislative information may be found on the NSVMA webpage. ([www.nsvma.ca](http://www.nsvma.ca))  
Send completed application form with all documentation to:  
The Registrar, Nova Scotia Veterinary Medical Association, 15 Cobequid Road, Lower Sackville, NS B4C 2M9

## NSVMA Application -- Registered Veterinary Technologist

Full Name \_\_\_\_\_

Email Address \_\_\_\_\_

Permanent Address

Street \_\_\_\_\_

City \_\_\_\_\_ Province/State \_\_\_\_\_ Country \_\_\_\_\_

Postal code \_\_\_\_\_ Telephone # \_\_\_\_\_

EVTA Membership number / VTNE Number: \_\_\_\_\_ / \_\_\_\_\_

Number of hours worked in the past 5 years: \_\_\_\_\_

Number of CE hours in the past year: \_\_\_\_\_

Place of Employment: \_\_\_\_\_

Veterinary Technology Program completed at the following accredited institution.

\_\_\_\_\_  
Name of Institution \_\_\_\_\_ Year \_\_\_\_\_

I have additional professional qualifications, as listed below.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**I DECLARE THAT:**

1. My citizenship is \_\_\_\_\_
2. I am not the subject of any existing or pending complaint or disciplinary finding in any licensing jurisdiction.  
( ) Yes I am ( ) No I am not

3. I am competent, capable, and of such character to safely and ethically practice veterinary technology.  
YES ( ) NO ( )

2. Do you agree, if accepted and while so registered, to act in a professional and becoming manner, in accordance with the Nova Scotia Veterinary Medical Act, Regulations, Bylaws and Associated Annex, together with the Code of Ethics, and Standards of Practice of the Nova Scotia Veterinary Medical Association?  
YES ( ) NO ( )

3. Do you have any unresolved complaints registered against you and are you currently under investigation by a veterinary licensing body?  
(If yes, please provide information to us.) YES ( ) NO ( )

4. Do you have any disciplinary findings against you?  
(If yes, please provide information to us.) YES ( ) NO ( )

5. Have you been convicted of any offence under the Criminal Code of Canada or the controlled Drugs & Substances Act (Canada), for which a pardon has not been granted, or convicted of any offence that is inconsistent with the proper professional behavior expected of a member of the NSVMA?  
YES ( ) NO ( )

6. Professional activity if application accepted: (Please check the boxes that apply to you.)

- |   |   |
|---|---|
| <input type="checkbox"/> 1 Small Animal                               | <input type="checkbox"/> 5 Government (any level) |
| <input type="checkbox"/> 2 Large Animal                               | <input type="checkbox"/> 6 Teaching               |
| <input type="checkbox"/> 3 Equine                                     | <input type="checkbox"/> 7 Research               |
| <input type="checkbox"/> 4-1 Mixed Practice (Primarily Large Animals) | <input type="checkbox"/> 8 Industry               |
| <input type="checkbox"/> 4-2 Mixed Practice (Primarily Small Animals) | <input type="checkbox"/> 9 Other                  |

7. I am or was previously registered in the following Veterinary Medical Associations / Colleges which regulate RVTs.

(Use the back of the page if additional space is required.)  
(Letter(s) of Good Standing should be forwarded directly to the NSVMA by the author of the letter.)

\_\_\_\_\_  
Jurisdiction From To

\_\_\_\_\_  
Jurisdiction From To

8. I authorize the Registrar of the Nova Scotia Veterinary Medical Association to make those inquiries that he/she deems relevant to my application for membership and I further authorize those agencies and bodies holding such information to provide them upon request by the Registrar of the Nova Scotia Veterinary Medical Association. Personal information is for NSVMA use only.

9. The Nova Scotia Veterinary Medical Association (NSVMA) primarily communicates with its members through electronic means. (e.g. email, electronic newsletters, etc.) I agree to accept electronic communications from the NSVMA (express consent) and I will contact the NSVMA office to unsubscribe should my wishes change in this regard.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

**Documents to include with your application (check list):**  
**Enclose cheque or money order (Canadian funds) for the appropriate fees with the application.**

- ( ) Application Form
- ( ) Cheque for proper amount (Fees plus Admission Fee)
- ( ) Recent photograph on photo grade paper
- ( ) Copy of Certificate of Current Membership with the EVTA
- ( ) Copy of Veterinary Technology Program diploma
- ( ) Verification of VTNE results
- ( ) Copy of current (3 months) signed and sealed Criminal Reference Check
- ( ) Letters of Good Standing from all other licensing veterinary medical associations / colleges which regulate RVTs

The NSVMA office will supply you with the NSVMA entrance quiz, and the AMR course information / quiz if you have not completed an AMR quiz yet.

The license year is July 1, 2018 / June 30, 2019

The NSVMA does not pro-rate fees.

All new members are to include the admission fee with their application.

**NSVMA RVT      New Members**

|     |  |        |   |       |    |                |
|-----|--|--------|---|-------|----|----------------|
|     |  | Fee    |   | HST   |    |                |
| ( ) | New Member Admission Fee                   | 129.78 | + | 19.47 | \$ | 149.25         |
| ( ) | Registered Veterinary Technologist License |        |   | 84.00 | +  | 12.60 \$ 96.60 |
|     |  |        |   | Total | \$ | 245.85         |

**NSVMA RVT      Renewal - Members**

|     |  |       |   |       |    |       |
|-----|--|-------|---|-------|----|-------|
|     |  |       |   |       |    |       |
| ( ) | Registered Veterinary Technologist License | 84.00 | + | 12.60 | \$ | 96.60 |