





# VETERINARY SURGEONS BOARD OF SOUTH AUSTRALIA

**Application** (tick boxes where applicable)

I hereby apply for registration on the specialist register

1. Nominated Specialty: .....

2. Qualifications: .....

3. How many years have you been working in this specialist field (inclusive of training) for a minimum of 25 hours per week? .....

4. How would you describe your current activities in your speciality?

Referral Practice

Teaching

Research

Government

Consultancy

Other .....

*(please specify)*

5. Are you registered as a veterinary specialist elsewhere?

Yes

No

Specialist Category: .....

Year of Registration: .....

State / Territory / Country: .....

6. Have you ever been declined registration as a specialist?

Yes

No

**If YES**, in what jurisdiction were you declined registration as a specialist and what was the reason?

.....  
.....  
.....  
.....  
.....



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## Prescribed Fees

\$240.00 application for registration - specialist register

**PLUS**

\$344.00 annual practice fee - specialist register

*GST is not payable on prescribed fees*

## Remittance Advice

*(please circle payment type)*

Cheque / Money Order      \$.....

MasterCard / Visa          \$.....

Card No:   

Expiry No:    /      CVV Number:

Name on Card: .....

Signature: .....      Date: .....

## DECLARATION

I, ..... declare that the particulars of this application are true in every respect to the best of my knowledge, information and belief.

Signature: .....      Date: .....

**POST TO:**      VETERINARY SURGEONS BOARD OF SOUTH AUSTRALIA  
                         GPO BOX 11020  
                         ADELAIDE SA 5001