SAVC
SOUTH AFRICAN VETERINARY COUNCIL

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REGISTRAR: MR MONGEZI MENYE

APPLICATION FOR AUTHORISATION TO PRACTISE A VETERINARY OR PARA-VETERINARY PROFESSION IN TERMS OF SECTION 23(1)(C) 1 APRIL 2025 TO 31 MARCH 2026:

Researchers and Research Students

- Application for authorisation cannot be considered unless submitted by the prospective employer;
- Incomplete applications will not be accepted or processed to serve at the Registration and Authorisation meeting for a decision; and
- No person may commence work/ research prior to final receipt of the conditions of authorisation.

PLEASE NOTE: THIS FORM MUST BE SENT WITH THE FOLLOWING SUPPORTING DOCUMENTS

- Certified copy of your identity document/passport;
- Certified copy of valid work visa or study permit [foreigners];
- Certified copy of qualification/s;
- Signed Supervision Agreement; and
- Proof of payment for the application fee. (Use initial and surname of applicant as payment reference)

  EFT must be paid into the South African Veterinary Council bank account:
  - **ABSA, Hatfield Branch (Branch Code 335 545)**
  - **Account No. 020166762.**

APPLICATION FOR AUTHORISATION WILL NOT BE CONSIDERED UNLESS SUBMITTED BY THE PROSPECTIVE EMPLOYER OR ACADEMIC INSTITUTION.

PLEASE FILL-IN THE FORM AND SUBMIT TO EMAIL: AUTHORISE@SAVC.ORG.ZA

1. **TYPE OF AUTHORISATION APPLIED FOR (***please mark applicable block with X*):
   PS. Please refer to the categories & classification for authorisation of researchers, to ensure you select the correct category.

Researchers	**Category A**	**R1 911**	Minor, minimally invasive, or killing procedures, that do not involve sedation, analgesia or general anaesthesia;	
	Category B	**R1 911**	Minor or minimally invasive procedures involving sedation, analgesia or brief (< 15 minutes duration) general anaesthesia, with no residual pain on recovery; or surgical procedures conducted under brief non-recovery general anaesthesia;	
	Category C	**R1 911**	Surgical procedures involving general anaesthesia; the administration and maintenance of balanced or more prolonged (≥ 15 minutes duration) general anaesthesia; or use of neuromuscular blocking agents;	
	Category D	**R1 911**	Other procedures or techniques that do not fall into any of the other Categories [Note: This Category should only be used in exceptional cases];	
	Category E	**R1 911**	Health practitioners registered HPCSA who perform Category A to C procedures, in cases where the procedures on humans are included in the health practitioner's Scope of Practice;	
	Category F	**R5 733**	Persons who perform, on a professional or employment level, inter alia some of the services, functions or procedures of veterinarians, laboratory animal technologists or other para-veterinary professionals.	

Research Student	**Category A**	**R585**	Minor, minimally invasive, or killing procedures, that do not involve sedation, analgesia or general anaesthesia;	
	Category B	**R585**	Minor or minimally invasive procedures involving sedation, analgesia or brief (< 15 minutes duration) general anaesthesia, with no residual pain on recovery; or surgical procedures conducted under brief non-recovery general anaesthesia;	
	Category C	**R585**	Surgical procedures involving general anaesthesia; the administration and maintenance of balanced or more prolonged (≥ 15 minutes duration) general anaesthesia; or use of neuromuscular blocking agents;	
	Category D	**R585**	Other procedures or techniques that do not fall into any of the other Categories [Note: This Category should only be used in exceptional cases];	
	Category E	**R585**	Health practitioners registered HPCSA who perform Category A to C procedures, in cases where the procedures on humans are included in the health practitioner's Scope of Practice;	
	Category F	**R1 754**	Persons who perform, on a professional or employment level, inter alia some of the services, functions or procedures of veterinarians, laboratory animal technologists or other para-veterinary professionals.	

2. PLEASE INDICATE NATURE OF APPLICATION FOR AUTHORISATION (*please mark applicable block with X*):

New Authorisation	
Renewal of Authorisation	
Extension of Condition of Authorisation (Additional Procedures /Services)	

3. EMPLOYER DETAILS

Name of Facility/Employer	
SAVC Facility Registration Number	
Principal of Facility	
Supervising veterinarian/ LAT	
Physical Address	
Office Number	
Principal / supervising vet email address	

4. APPLICANTS' DETAILS (APPLYING FOR AUTHORISATION)

Names and Surname [As Per ID]			
Date of Birth			
ID Number or Passport No.			
SAVC Authorisation No.(if previously authorised by SAVC)			
Nationality		**Home Language**	
Gender		**Race**	
Cell No.		**Email Address**	
Residential Address		**Postal Address (If Different from Postal Address)**	

QUALIFICATIONS (*please attach certified copies of the stated qualifications*):

Qualification Obtained	Name of Institution	Date

5. PLEASE CONFIRM THAT YOU HAVE ATTACHED SUPPORTING DOCUMENTS

(*please mark applicable block with* ***X***):	YES	NO
1. A CV, indicating the expertise and competence required in support of the application for authorisation.		
2. Proof of employment and job description OR Proof of enrolment and duration of studies [for students]		
3. Motivation letter from employer / training institute to support the need for the authorisation		
4. List of the procedures and species, for which authorisation is applied for		
5. Certification of competence by the supervisor [registered veterinarian/ para-veterinary professional] for all the procedures indicated in the authorisation application,		
6. A letter/s or certificate to confirm that animal ethics training /course was attended or will be attended.		
7. Proof of submission and approval of the research project by the Animal Ethics Committee [AEC]		
8. Supervision agreement signed by: Applicant, Supervisor [registered veterinarian or para-veterinarian] and Employer [Head of Institution/Chairperson of AEC/Project Leader]		
9. Confirmation of sufficient presence of registered veterinary and para-veterinary presence to adequately supervise all authorised personnel as per the conditions of authorisation		
10. Proof of SANAS registration and accreditation		
11. Confirmation of compliance with the Medicines and Substance Related Act, Act 101 of 1965		
12. Confirmation of compliance with all relevant legislation pertaining to research including the Animal Diseases Act, Act 35 of 1984		
13. Proof of payment of the processing fee: (Use initial and surname of applicant as payment reference)		

6. DECLARATION (*please mark applicable block with X*):

HAVE YOU BEEN PROSECUTED / CONVICTED OF A CRIMINAL OFFENCE?	**NO**	**YES**
YES (please furnish the particulars)		
HAVE YOU BEEN DISMISSED FROM EMPLOYMENT?	**NO**	**YES**
YES (please furnish the particulars)		

I declare that the above information is true and correct. Any changes to any circumstances relating to the applications and /or conditions of authorisation will immediately be brought to the attention of the SAVC.

Applicant's Signature	Employer/Principals' signature	SAVC Registered Supervisor's signature
Date	**Date**	**Date**

Protection of Personal Information Act, 2013 (POPIA)
We are committed to ensuring the security and protection of the personal information that we process, and to provide a compliant and consistent approach to data protection. As a Data Subject you do have certain rights, including the right to be notified that personal information about you is being collected. A copy of our POPIA Section 18 Privacy Notification – Members is available at our Information Officer or on our website.