

**APPLICATION FORM
SAVC REGISTRATION EXAMINATION - 2021
VETERINARIANS**

26 Victoria Link Street, R21 Corporate Park, Nellmapius Drive, Irene
Tel: 0027 (0)12 345 6360

[COMPLETE THE FORM IN BLOCK LETTERS OR IN TYPED FORMAT; THEN PRINT AND SIGN]

1. Have you previously sat the Full Registration Examination/s?	YES/NO If YES, supply year/s:
2. Are you currently working in South Africa?	YES/NO If YES, supply authorisation number:
3. Surname/Family name	
4. First name/s	
5. Identification/Passport number	
6. Nationality	
7. Date of birth	
8. Cell number in South Africa	
9. Cell number abroad	
10. E-mail addresses <i>[Please provide all e-mail addresses]</i>	
11. Postal address	
12. Alternate contact numbers <i>[Please provide all contact numbers. The SAVC Administration should be able to contact applicants/candidates following applications and prior to examinations.]</i>	
13. Secondary Schooling and Tertiary Education with Qualifications obtained (Diploma/Degree) [Excluding Postgraduate qualifications]	
13.1 Institution (Secondary)	
13.2 Date/s obtained	
13.3 Institution (Tertiary)	

13.4 Date/s obtained	
14. Postgraduate Qualifications obtained (Diploma/Degree)	
14.1 Institution/University	
14.2 Date/s obtained	
15. Fees (For Admin only)	
15.1 Administration fee	R517,00
15.2 Examination fee incl admin fee <i>[Proof of payment enclosed]</i>	R34 238,00
<p>I _____ hereby declare that I accept and understand the examination rules for the year in which I intend to sit the examination.</p> <p>I confirm that I have familiarised myself with the SAVC examination documents (A-H) as per the SAVC website (www.savc.org.za).</p> <p>I also accept that registration for the examination does not automatically give me authority to practice as a <u>veterinarian</u> until I pass the examination.</p> <p>Signed _____ Date _____</p>	
<p><i>Thus, signed and sworn before me at _____ on this the _____ day of _____ 20____, the deponent having acknowledged that s/he knows and understands the contents of this affidavit, has no objection to taking the prescribed oath and considers it binding on her/his conscience.</i></p> <p>_____ Commissioner of Oaths</p>	

[NOTE: Any dishonesty in completion of this form will be regarded as serious.]

[VC6/2/EXAMS/Doc A – VETS: MAR 2021]