A picture containing text

Description automatically generated**European College of Veterinary Anaesthesia and Analgesia**

Application to submit or resubmit credentials

Candidates should read the ECVAA Bylaws (Article 6.1) and the Policies and Procedures Chapter 6 and Appendix II carefully before submitting this application. A helpful checklist is available on the ‘How To’ page of the website.

Instructions:

* Please check / tick all boxes below which apply to your submission
* Save this completed form and your other documents as pdfs and name them as follows: YourSurname FirstName Credentials Year (e.g. 2024) NameOfDocument

Receipt of this form will be acknowledged. **If you do not receive acknowledgement by 7th March, please contact the ECVAA Secretary and keep a copy of all communications.**

Deadline for submission of credentials: **March 1st**

**1. NAME IN FULL** (surname first, all in block capitals):

**2. MY PRONOUNS** **ARE** *(Please check appropriate box)*

She/her/hers  He/him/his  They/them/theirs

**3. POSTAL ADDRESS** for all correspondence

**4. Phone**:

**5. E-MAIL** *(please ensure this is the same as your email on the ECVAA website)*:

**6. TYPE of RESIDENCY Programme:**

Standard Main supervisor:

**or**

Alternative Main supervisor:

**7. Date of START OF YOUR RESIDENCY PROGRAMME:**

**8. DATE OF COMPLETION OF YOUR RESIDENCY PROGRAMME**:

(Please check the letter received from Secretary at approval of your programme)

**9. PERIODS OF EXPERIENCE IN VETERINARY ANAESTHESIA BEING OFFERED** (to meet the requirements of the bylaws):

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Dates | | Duration  (months) | Where taken | Name of supervisor at the centre |
|  | from | to |
| 1 |  |  |  |  |  |
| 2 |  |  |  |  |  |
| 3 |  |  |  |  |  |
| 4 |  |  |  |  |  |
| 5 |  |  |  |  |  |
| 6 |  |  |  |  |  |

**10. SUBMISSION OF THE CREDENTIALS:**

*Please read carefully and check all relevant boxes*

I am submitting my credentials for the first time for approval this year

**or**

I am re-submitting my credentials for approval this year

Dates of previous submission(s):

**11. EXAMINATIONS** (please indicate provisional details only)

I request approval of my credentials only and **do not** intend to sit the examinations this year

I request approval of my credentials and **do plan** to sit the examinations this year

*Please note that if your credentials are approved you will need to complete the relevant form and pay fees by July 1st this year*

**12. FEES FOR CREDENTIALS EVALUATION OR RE-EVALUATION**

I have paid the prescribed fee via electronic transfer

*When your credentials have been submitted please follow the website links to receive information, by email, on how to pay the relevant fee in Euro (or the equivalent in Sterling).*

**13A – Old Training Pathway**

**With this form, I submitted the following** (please check as appropriate):

Completed curriculum vitae template

My final annual report (also previously sent to Chair of Education committee: education.ecvaa@gmail.com)

First page of externship evaluation forms if applicable

All pertinent correspondence if special circumstances have been granted (e.g. extension of the programme duration).

Summary table of the ICU cases and 15 ICU case descriptions.

Two case reports in English

Two original papers

My Excel logbook including 300 anaesthetics (sent by email to the Chair of Credentials committee: creduc.ecvaa@gmail.com)

I certify that not more than 150 (50%) of the submitted anaesthetics were collected under experimental conditions.

**13B. New Training Pathway**

**With this form, I submitted the following** (please check as appropriate):

Completed curriculum vitae template

My final annual report (also previously sent to Chair of Education committee: education.ecvaa@gmail.com)

First page of externship evaluation forms if applicable

All three (3) mandatory rotation evaluation forms – one for each rotation

At least two ‘Oral presentation for Credentials’ evaluation forms (completed and signed)

All pertinent correspondence if special circumstances have been granted (e.g. extension of the programme duration).

Two original papers

My Excel logbook including 300 anaesthetics (sent by email to the Chair of Credentials committee: creduc.ecvaa@gmail.com)

I certify that not more than 150 (50%) of the submitted anaesthetics were collected under experimental conditions.

**14. I HEREBY APPLY FOR EVALUATION OF MY CREDENTIALS**

Signature       Date

By signing this document, you agree to your information being used as per the ECVAA Privacy Policy, which is available at [www.ecvaa.org](http://www.ecvaa.org). If you do not agree with this Privacy Policy, please contact the ECVAA Secretary: [ecvaa.secretary@gmail.com](mailto:ecvaa.secretary@gmail.com)