

# EUROPEAN VETERINARY PARASITOLOGY COLLEGE (EVPC)

## APPLICATION TO RETAKE THE EVPC EXAMINATION

This form is to be completed by the prospective candidate  
and sent to the EVPC Secretary with a copy to the Chairman of the Credentials Committee.

Name of prospective candidate: .....

Address:

E-mail:

I hereby apply to resit the EVPC examination due to be held in the year: .....

I declare that:

- 1) I am licensed to practice veterinary medicine in the countries of the European Union/ I have been relieved of this obligation by the EVPC Board (*delete as appropriate*).
- 2) I am active in Veterinary Parasitology for at least 60% of my working time (i.e. at least 24 hours per week).

Outline any additional training or study undertaken or planned since you last took the EVPC examination:

Signed: .....

Date .....

**PLEASE ATTACH TITLES AND SUMMARIES OF THE 12 CASE REPORTS THAT YOU WILL BE PRESENTING (UNLESS EXEMPTED FROM THIS COMPONENT OF THE EXAMINATION)**