



ECVDI European College Of
Veterinary Diagnostic Imaging®

Your Resident Enrolment Form

Reçu / Email reçu :

- ✓ Informations du reçu : dans bandeau
- ✓ Gras : prix, nom, prénom, date naissance, adresse
- ✗ ... en paiement de la cotisation à notre ...
- ✓ numéro de licence

1. Personal information

Name : Pr. Admin CYIM

Gender : Female

Address : zfsdgb

35666

fdezf

France

Mobile number : 066666666666

Email : admincyim@cyim.com

2. Licencing information

Are you currently registered/licensed/eligible to be licensed to practice veterinary medicine and surgery in a European country?	
Which country(ies) are you registered/licensed/eligible to be licensed to practice veterinary medicine and surgery?	
Have any of your licenses to practice veterinary medicine ever been suspended?	
If yes, please give brief details and we will contact you for further information	

3. Residency programme information

Type of programme	STANDARD	X	ALTERNATIVE	
Type of programme	SMALL ANIMAL BIASED TRACK	X	LARGE ANIMAL BIASED TRACK	
Training center	France - Centre Hospitalier Vétérinaire Fregis			
Select your supervisor (s)				
Name of programme director	Dr. Eymeric GOMES			
Your start date in this programme	16/03/2021			

4. Veterinary degree

Name and country of the veterinary school where you got your veterinary degree	zef - Angola
Year that you graduated from veterinary school	1965
Is the veterinary school you attended EAEVE-Approved? If so, what year?	

5. Previous internship (s) or equivalent clinical experience prior to this residency programme

Dates attended	Programme name	Director/supervisor	Institution and address (incl country)

6. Declaration

We have read, discussed, understand and accept the rules and regulations laid out in the College Constitution and Polices and procedures and are aware that changes are made periodically to these documents.

Date : __ / __ / ____

Resident signature

Supervisor signature

Program Director signature

NOTE: This form must be either signed digitally or a scanned version of the hand-signed form must be included with the application.

Please submit the form to adminecvdi@ecvdi.eu. Once the enrolment form has been processed you will be issued with a username and password so you can logon to the ECVDI website to make the payment for the enrolment fee.

