



INSTRUCTIONS

APPLICATION FOR LICENSE

(Grandfathering period only – 12/15/13 – 08/31/14)

LICENSED VETERINARY TECHNICIAN (LVT)

Revised 12/13

Prior to September 1, 2014, you may apply for an LVT license through the 'grandfather' clause currently found in the Texas Veterinary Licensing Act, effective September 1, 2013. You are not required to take and pass a licensing examination if you apply for and gain your license between December 15, 2013 and August 31, 2014. After August 31, 2014, you must apply for, take and pass the appropriate jurisprudence examination. **If you are NOT currently registered with the TVMA, you are NOT eligible to gain a license through the 'grandfather' clause.**

GENERAL INFORMATION AND INSTRUCTIONS

If you meet the following pre-requisites and criteria, you may fill out and submit the application for a Licensed Veterinary Technician (LVT) license.

- You are currently registered with the Texas Veterinary Medical Association (TVMA).

This agency, TBVME, is working with the TVMA (Texas Veterinary Medical Association) directly to obtain verification of current registration for technicians to be eligible to gain a license via the grandfathering clause. The LVT applicant **MUST** be current and in good standing with TVMA.

For your application to be considered, you must submit the application with all required documentation and the fee by no later than August 31, 2014. You are not considered licensed until an actual license is issued to you, and you receive notification and a license from this agency. The submission of your application **DOES NOT GUARANTEE THAT A LICENSE WILL BE ISSUED**. You cannot use the term "Licensed Veterinary Technician" until you are actually licensed.

Fee: \$70 – generally non-refundable. We can only accept a money order or cashier's check made payable to the TEXAS BOARD OF VETERINARY MEDICAL EXAMINERS or TBVME. A personal or business check or cash is unacceptable.

Submit Application, documents and fee to:
Texas Board of Veterinary Medical Examiners
333 Guadalupe Street, Suite 3-810
Austin, Texas 78701

YOU ARE RESPONSIBLE FOR THE TIMELY SUBMISSION OF ALL REQUIRED MATERIAL AND DOCUMENTATION. AN INCOMPLETE APPLICATION WILL NOT BE PROCESSED, AND YOU WILL NOT BE ISSUED A LICENSE.

APPLICATION DOCUMENTATION CHECK LIST

ALL Applicants Are Required To Furnish:

- ❑ Completed Application – Must be filled out completely (no blank spaces), signed, dated and notarized or it is considered incomplete, will not be accepted and will be returned to you.
- ❑ Money Order or Cashier’s Check for the **\$70** fee made payable to the TEXAS BOARD OF VETERINARY MEDICAL EXAMINERS or TBVME. The fee is generally non-refundable.
(NOTE: Personal or business checks and/or cash will NOT be accepted.)
- ❑ Certified Copy of Your Birth Certificate.
Certified copies may be obtained from the Health Department, Bureau of Vital Statistics, in the state where you were born. Most states charge a fee for this service, so contact them as soon as possible to avoid a delay in receiving your birth certificate. Hospital birth certificates and notarized copies are not acceptable. **If you are foreign born applicant, you must submit a certified copy of your birth certificate from the country of birth.**
- ❑ Foreign born individuals must also furnish documentation of legal status in the US. See the “Frequently Asked Questions” page of the application for list of acceptable documentation.
- ❑ One recent (not older than 6 months) Passport-Type Photograph of you (Must be 2” x 2”)
 - Close-up photos only (Your face must fill most of picture);
 - Frontal face shots only;
 - May be black and white **OR** color;
 - No hats or sunglasses;
 - Must be signed and dated on back;
 - Not dog-eared, folded or bent.
- ❑ DD 214 (if discharged from the Armed Forces) for each period of service.
Submit a copy of entire form showing “Type of Separation” (discharged) and “Character of Service” (honorable, dishonorable, etc.).
- ❑ Other State license verification
If you are licensed as a veterinary technician in another state, country or jurisdiction, you must submit a “letter of license verification and good standing” from the licensing authority in that state. If your license has lapsed, the letter is still required to ensure that while you held the license, it was in good standing and unencumbered.
- ❑ Official verification of current registration from the Texas Veterinary Medical Association (TVMA) if available. However TBVME is working with the TVMA (Texas Veterinary Medical Association) directly to obtain verification of current registration for technicians to be eligible to gain a license via the grandfathering clause. The LVT applicant **MUST** be current and in good standing with TVMA.

Contact Information:

Texas Board of Veterinary Medical Examiners
333 Guadalupe, Ste. 3-810
Austin, TX 78701-3942
512-305-7555 (phone) 512-305-7556 (fax)
Web site: www.tbvme.state.tx.us
email: vet.board@tbvme.state.tx.us

Texas Veterinary Medical Association
8104 Exchange Drive
Austin, TX 78754
512-452-4224 (phone) 512-452-6633 (fax)
Web site: www.tvma.org
email: awalker@tvma.org



TEXAS STATE BOARD OF VETERINARY MEDICAL EXAMINERS
APPLICATION FOR LICENSED VETERINARY TECHNICIAN (LVT)

PURPOSE This application is required for eligible persons to apply for and earn a Texas License for Veterinary Technicians (LVT).

APPLICATION REQUIRED A completed application with **all** supporting documentation and fee must be received in the Board office. If the application is incomplete, it will not be accepted or processed, and will be returned. Please allow a minimum of two (2) weeks for the processing of your application.

All required information must be either **typed or printed in black or blue ink** and in the English language. You must answer all items/questions completely and accurately. If some responses require more space than the form provides, attach additional sheets. Incomplete answers or failure to provide required data or documents may be grounds for rejection of the application. Further, if, after licensing, responses are found to be false, inaccurate or incomplete, disciplinary action, including suspension or license revocation, may be initiated. The completed application must be sworn to and **notarized**. Please mail all material to: Texas Board of Veterinary Medical Examiners, 333 Guadalupe Street, Tower 3, Suite 810, Austin, Texas 78701.

APPLICATION FEE The fee is **\$70** payable at the time of application submission in the form of a **money order or cashier's check** made payable to the TEXAS BOARD OF VETERINARY MEDICAL EXAMINERS or TBVME. The fee is generally non-refundable.

I. GENERAL INFORMATION

1. a. Full Name (Last) _____ (First) _____ (Middle) _____
b. Social Security Number _____
c. Maiden Name (if applicable) _____
d. Give your name the way you wish it to appear on the license when issued (nicknames are not permissible) _____
e. If married, husband's name or MAIDEN name of wife. _____
f. Have you ever used any other name or has your name ever been changed? (**includes name change due to marriage or divorce**). _____ If "yes", attach a separate sheet giving full details and attach a copy of the legal document changing your name (e.g. marriage certificate, divorce decree, court order, etc.)
g. Have you ever applied to this agency before? _____ If "yes", please give the approximate date and name under which you applied and for what you applied. _____

2. Mailing Address: (Please indicate if this is your clinic/hospital address or your home address).
Clinic/Hospital Name: (if applicable) _____
Street/apt# _____ City _____ State _____
Zip _____ Country if not U.S. _____
Clinic Address: Home Address: (Please check the applicable box)

3. Phone Number: (a) Residence: _____ (b) Work: _____

(c) Cell: _____ (d) E-mail address: _____

We strongly encourage you to give us your e-mail address, as it will be one of the main sources of contact between this agency and you.

4. Driver License Number and State in which issued: _____
5. Give **date and place** of birth. _____
Attach a certified copy of your birth certificate. Please refer to the instructions and "Frequently Asked Questions" for more detailed information.
6. Give accurately your present: Height _____ Weight _____ Color of Hair _____
Color of Eyes _____ Complexion _____ Distinguishing marks and/or scars, give location and description _____
7. List chronologically each place of residence, post office addresses and date when you commenced and terminated each such residence for the last ten (10) years. Attach additional sheets, if needed.

Address	City/State	Mo.&Yr. Commenced	Mo.&Yr. Terminated

II. EDUCATIONAL INFORMATION

1. Give the name of the AVMA accredited program of technology from which you graduated:

2. Give the type of degree that you earned. _____
3. Give the date of your original, official registration with the TVMA (Texas Veterinary Medical Association), the registration number issued to you and its expiration date:

TVMA Reg. #	Issue Date	Expiration Date

TBVMC is working with TVMA directly to obtain official verification of your current registration, including the registration issue and expiration date.

III. PERSONAL BACKGROUND

1. a. Have you ever been a party to, or a witness in, any legal proceedings, either civil, criminal or administrative? Yes No
- b. Have you ever been convicted of, charged with or indicted for a criminal offense? Yes No

- c. Have you ever held a license to work as a veterinary technician and the license was revoked, suspended, canceled, surrendered or otherwise sanctioned? Yes No
- d. Have you ever been involved in a disciplinary action or proceeding by an organization such as the TVMA (Texas Veterinary Medical Association) Yes No
2. If the answer to (a), (b), (c) or (d) is "yes", please attach a separate sheet(s) giving a full explanation including dates, the court or courts, reference to the court records, if any, and the disposition of each such matter. If no court records are available, give to the best of your ability the names and addresses of all persons involved, including any legal counsel. If the proceeding involved TVMA or another organization for veterinary technicians, please include a copy of all documentation and information regarding the action or proceedings and the outcome, including any sanctions levied upon you by the organization.
3. a. Have you ever served in the Army, Air Force, Navy, Marine Corps, Coast Guard, or any other branch of the Armed Forces of the United States? _____
- b. If the answer to (a) is "yes", please attach form DD 214 for each period of service. If you are on active duty at this time, please indicate. _____
4. **If you are NOT a citizen of the United States**, or if you are **foreign born**, you must verify your legal status. See the checklist instructions and the "Frequently Asked Questions" page for more details.
5. **Enclose one recent picture.** Please see checklist for specifications.

IV. EMPLOYMENT HISTORY

1. List the occupations and employment in which you have been engaged for the past 10 years, listing names of employers, their full addresses, and dates. (Attach additional sheet if needed)

Name of Employer	Complete Address	Dates of employment

V. LICENSES

1. Are you now or have you ever been registered or licensed as a veterinary technician in another state, country or jurisdiction? Yes No If "yes", please complete the following: (attach additional sheets, if needed)

State	Permit No.	Issue Date	Active/Inactive	# of Yrs. practiced

*If this applies to you, please have the attached verification form completed. You do not have to use the form. A letter of verification of license and good standing from the appropriate authority is also acceptable. The form may be reproduced if you need more than one. **The applicant is responsible for contacting and submitting the form to the appropriate entity(ies).**

2. Are you now or have you ever worked as a veterinary technician in a state that does not require registration or licensure to work as a veterinary technician? Yes No
 If "yes", please list the state, as well as the dates during which you worked in that state:

State	Begin Date of employment as a veterinary technician	End Date of employment as a veterinary technician	Any complaints filed against you?*

* If 'yes', please give us details or attach pertinent documentation.

3. a. To your knowledge, have you ever failed a licensing examination? _____ If "yes", please give the state, country or jurisdiction, date, and the type of examination. _____
- b. Have you been refused or denied licensing or examination for licensing in any state, country or jurisdiction? _____ If the answer is "yes", please name state(s) and give approximate date(s) and reason(s) for refusal or denial. _____
- c. Have you been issued a 'Cease and Desist Order' in this or any other state due to you practicing outside the scope of your employment as a veterinary technician? Yes No
 If the answer is "yes", please name the state(s), give date(s) and attach pertinent documentation: _____

VI. SUBMITTING APPLICATION & PAYING FEE

1. Attach a **money order** or **cashier's check** in the amount of **\$70**. **Cash or personal checks are NOT accepted.** The ENTIRE fee must accompany this application. *ALL MONEY ORDERS AND/OR CASHIER'S CHECKS MUST BE PAYABLE TO: THE TEXAS BOARD OF VETERINARY MEDICAL EXAMINERS OR TBVME.*
2. The application, fee, and related documents must be mailed to: TEXAS BOARD OF VETERINARY MEDICAL EXAMINERS, 333 Guadalupe Street, Tower 3, Suite 810, Austin, Texas 78701. **THIS APPLICATION AND FEE MUST BE MAILED OR HAND-DELIVERED TO THE BOARD OFFICE.**

VII. AFFIRMATION

In addition to the foregoing:

- a. I understand and agree that this application and all supporting information, documents, and instruments submitted herewith become the property of the State of Texas, and will not be returned in whole or in part.



TEXAS BOARD OF VETERINARY MEDICAL EXAMINERS
CERTIFICATE OF VALID VETERINARY TECHNICIAN (LVT) LICENSE ISSUED

TO THE APPLICANT:

Please complete the top section of this form and mail it to the Board of each state in which you are now or have ever been licensed as veterinary technician. Some states may charge for this service.

TO WHOM IT MAY CONCERN:

I am applying for a veterinary technician license in the State of Texas. Completion of this form is a requirement in order that I may be eligible to apply for a veterinary technician license. This is your authority to release any information in your files concerning me, favorable or otherwise, to the Texas State Board of Veterinary Medical Examiners.

TYPE OR PRINT YOUR FULL NAME

SIGNATURE

DATE

LICENSE NUMBER AND ISSUE DATE

ADDRESS

CITY/STATE/ZIP CODE

THE SECTION BELOW IS TO BE COMPLETED BY AN OFFICIAL OF THE BOARD

Please complete this section and return to:
Texas Board of Veterinary Medical Examiners
333 Guadalupe Street, Tower 3, Suite 810
Austin, Texas 78701-3942
(512) 305-7555

Re: _____

This is to certify that the records of the State Board of Veterinary Medical Examiners in the State of _____ reflect that the above named individual was issued license number _____ on _____ on the basis of: (MM/DD/YEAR)

Reciprocity/Endorsement from (Name of State) _____

Written Examination _____ Grade

Oral Examination

Please answer the following questions:

1. Is this license current? _____ YES _____ NO
2. Is this license in good standing at this time? _____ YES _____ NO
3. Has this individual ever been warned or reprimanded? _____ YES _____ NO
4. Has this individual's license ever been revoked? _____ YES _____ NO
5. Has this individual's license ever been suspended? _____ YES _____ NO
6. Has this individual's license ever been placed on probation? _____ YES _____ NO
7. Has this individual's license ever been restricted in any way? _____ YES _____ NO
8. Has this individual ever had any charges filed against him/her? _____ YES _____ NO
9. Do your files indicate any derogatory information whatsoever? _____ YES _____ NO

DATE
(Official Seal)

SIGNATURE

NAME OF BOARD

TITLE AND TYPED NAME OF OFFICIAL

NOTE TO THE BOARD OFFICIAL COMPLETING THIS FORM: If the answer to 1 & 2 is no, or 3 through 9 is yes, please explain and attach certified copies of any pertinent material, such as Notice of Hearing, Final Decision, Consent Order/Agreement, etc.

Frequently Asked Questions

How will my name appear on my license?

Your legal name, as it appears on your birth certificate, will be used, unless you have a legal document showing a change in your name. This includes marriage certificate, divorce decree, or court order. Nicknames are not allowed. While first and middle names cannot be dropped, you may use initials.

I have been discharged from the military. What documentation do you need?

If you have been discharged from the Armed Forces, copies of all separation papers (DD 214) are required. If you are on active duty at this time, please indicate. Need copy of entire Form DD 214 showing "Type of Separation" (discharged) and "Character of Service" (honorable, dishonorable, etc.).

How do I get a certified copy of my birth certificate?

You must contact the Bureau of Vital Statistics, Health Department or County Clerk in the State/County where you were born and request a 'certified' copy of your birth certificate. Most states/counties have this request on-line. There is a fee payable to the appropriate entity. Please allow a minimum of two (2) weeks for the organization to fulfill your request.

What if I was not born in the United States or Canada?

If you are currently a United States or Canadian citizen, **BUT** born in a foreign country, you must provide the following information:

1. Certified copy of your birth certificate from country of birth, **AND**
 - a. Current notarized copy of United States passport **OR** Canadian passport; **OR**
 - b. notarized copy of naturalization certificate;

If you are **NOT** a United States or Canadian citizen, you must provide the following information:

1. Certified copy of your birth certificate from country of birth, **AND**
2. Documentation of your legal status. According to information received from the U.S. Citizenship and Immigration Service (USCIS), the following items are acceptable as evidence of legal status.
 - a. Notarized copy of valid Alien Registration Card with photo; **OR**
 - b. Notarized copy of valid Resident Alien or Permanent Resident Card; **OR**
 - c. Notarized copy of valid VISA Waiver Travel Authorization; **OR**
 - d. Notarized copy of valid Certificate of Eligibility for Nonimmigrant Student.

What type of picture and how many do I need to submit with my application?

One Passport Type Picture

- o Must be 2" x 2";
- o Close-up photos only (Your face must fill most of picture);
- o Frontal face shots only;
- o May be black and white **OR** color;
- o No hats or sunglasses;
- o Must be signed and dated on back;
- o Not dog-eared, folded or bent.

DON'T FORGET TO HAVE PAGE 5 OF THE APPLICATION NOTARIZED.