

## VETERINARY PRACTICAL WORK EXPERIENCE VERIFICATION FORM

Student Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Student ID: \_\_\_\_\_ Email: \_\_\_\_\_

**Requirements:** You must complete 10 days (total ≥80) hours within 3 years of the start of the professional phase of the degree. **This work experience must be completed BEFORE you start the pre-selection semester, or you will not be eligible for selection.** For your preparation, we recommend you spend one week at 2 different clinics, with ideally 1 week of small animal and 1 week of large animal experience.

Dates at Practice: (From) \_\_\_\_\_ (To) \_\_\_\_\_

Number of Days worked: \_\_\_\_\_ Number of hours per day \_\_\_\_\_

Name of Practice: \_\_\_\_\_

Contact Phone Number: \_\_\_\_\_ Type of Practice: \_\_\_\_\_

Supervisors Name: \_\_\_\_\_ Position: \_\_\_\_\_

I confirm that the above named student was present during the dates stated and all details shown are correct.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

### Professional Attitude

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Satisfactory	Unsatisfactory (Please explain below)	Cannot Assess

### Interaction with Clinical Staff

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Satisfactory	Unsatisfactory (Please explain below)	Cannot Assess

Do you have any concerns about accepting this applicant into the BVSc or BVetTech programmes?

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
No	Yes (Please explain below)	Cannot Assess

### EXPLANATORY COMMENTS

If you have assessed the student as unsatisfactory or have any concerns about the student's suitability for the veterinary programme we would really appreciate if you could comment on that for us.

**Please return to this verification form by March 5 to:**

STUDENT

Student uploads a copy into the Student Portal

EMAIL a scanned or digital photo to:

[academicsupport@massey.ac.nz](mailto:academicsupport@massey.ac.nz)