



Supervising Veterinarian Declaration

Issue May 2016
Review Annually
Ref number FR03

I	Given name(s)		
	Family name		
	Registration number:	N	

of

Principal place of work address				
			Postcode	
	L		(if these are licensed premises)	

Hereby undertake to supervise the person named below in the manner determined by the Board¹ for the period and purpose stated below. I understand that the *Veterinary Practice Act 2003* (s 35(f)) defines failure to provide adequate supervision as unsatisfactory professional conduct.

	Given name(s)		
	Family name		
	Registration number:		(if currently registered in Australia)

of

Principal place of residence			
			Postcode
State or Territory			

Supervising period		
Specific purpose of supervision		

Signature		Date	
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¹ Refer to policy on requirement for supervised practice