

West Virginia Board of Veterinary Medicine

Certified Animal Euthanasia Technician (CAET) Application

You must answer completely and precisely all questions. Misstatements, fraudulent or insufficient answers and data required will be reason for rejection of your application. All answers must be in legible handwriting, and sworn by you, before a notary public. Use additional paper as necessary.

If you make a false statement concerning any question on this application, you may be subject to disciplinary action including, but not limited to, immediate revocation or suspension of your certification.

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|--|-------|--------|------|
| | First | Middle | Last |
|--|-------|--------|------|
1. Name: _____
 2. Permanent Mailing Address: (Street, City, State, Zip)

 3. Telephone # with Area Code: _____ E-mail Address: _____
 4. Birth Date: _____ Place of Birth: _____
 5. Social Security #: _____
 6. Attach a Photostatic copy of your birth certificate.
 7. If current name differs from birth name, attach documentation of any and all name changes (such as marriage certificate).
 8. Attach a recent photograph of yourself, approximately 2 by 2 inches in size, with your signature on the back in indelible ink. No photocopies or scanned copies allowed. Photo shall have only you in the photograph.
 9. Check One: Citizen of USA: _____ Have applied for US citizenship _____ Green Card: _____
 10. If foreign born, give date and place of immigration to this country, and date and place of naturalization, if applicable: _____
 11. If not a US citizen, you must submit proof of authorization to work in the U.S.
 12. Have you ever been involved in any civil or criminal proceedings as a party or witness? _____
If Yes, Explain: _____
 13. Have you ever been convicted of a criminal offense? _____
If Yes, Explain: _____

14. Name of the humane society or animal control facility where you will work as a Certified Animal Euthanasia Technician: _____
15. Physical address of the humane society or animal control facility where you will work as a Certified Animal Euthanasia technician: _____
16. Director or manager of the humane society or animal control facility listed above: _____
17. Attach a letter of recommendation bearing date and original signature from the director or manager of the animal control facility, approving and authorizing your application for certification as an animal euthanasia technician for that specified facility. If you are director, the letter shall be from county official or supervisor.
18. Phone number of the humane society or animal control facility listed above: _____
19. Is this facility a legally authorized (501c3) humane society or animal control facility? _____
20. Submit verification of facilities authority to operate as a humane society or animal control facility, such as a certificate of 501c(3) status by the Internal Revenue Service, or letter from county commission bearing an original signature of submitter, stating facility is an entity of county government
21. Attach a money order or check in the amount of **\$355.00**, payable to the West Virginia Board of Veterinary Medicine. These monies are for the training program, application/examination, veterinary practice act and rules & regulations, and background check by WV State Police. *Fees or any portion thereof are non-refundable and non-transferable.*
22. You must attach a letter from you, authorizing the West Virginia Board of Veterinary Medicine to make inquiries through the United States Department of Justice or any other legal jurisdiction or entity for purposes of determining your character and reputation, as well as other matters relating to your certification.

Pursuant to WV Code 48-15-303, each applicant for certification must answer the following questions and certify, under penalty of false swearing, that these answers are true and correct.

23. Do you have a child support or medical support obligation? Yes No
24. **If** the answer to number 23. is YES, are you in arrears? Yes No
25. If the answer to number 24. is YES, does your arrearage equal or exceed the amount of child support or medical support payable for six (6) months? Yes No
26. Are you the subject of a child support or paternity related subpoena or warrant? Yes No

(Print Name)

I, _____, being of full age and being duly sworn according to law, state that I am the person referred to in the foregoing application, that I have carefully read the instructions given and the questions asked in this application form, and that under penalty of perjury and false swearing, do certify that all statements made therein are true and correct. I further depose and state that I am of good moral character, never having been convicted of a felony, or of a misdemeanor involving moral turpitude. If a certification as an animal euthanasia technician is issued in my favor, I will respectfully comply with the laws and rules governing certification as an animal euthanasia technician in the state of West Virginia, and I will do my best to uphold and maintain the ethical standards of this profession. I understand that making a false statement may subject my license, if administered, to disciplinary action including, but not limited to, immediate revocation or suspension of the license.

Sworn to and subscribed before me, this _____ day of _____, A.D., Two Thousand and

_____. Applicant's Signature _____

Notary Public Signature _____

Notary Seal

Do Not Write Below This Line

This application and fees must be received by the WV Board of Veterinary Medicine by: March 11, 2010

Training Program will be given:

Date: April 9 & April 10, 2010 Time: 8:00AM

Place:(TBD) at Fairmont State University, Fairmont, WV

Examination will be given:

Date: April 11, 2010 Time: 9:00 AM

Place: (TBD) at Fairmont State University, Fairmont, WV.

Return this application with fee to:

**Ms. Wanda Goodwin: Executive Director
West Virginia Board of Veterinary Medicine
5509 Big Tyler Road, Suite 3
Cross Lanes, WV 25313**