

BACHELOR OF VETERINARY SCIENCE

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 should be completed BEFORE you start the pre-selection semester and must be submitted by the due date on the BVSc planning webpage.**

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