

European College of Veterinary Surgeons ECVS
Board Exam - July 6-8, 2008 - Zurich, Switzerland
Registration form for certifying examination to attain diplomate status



Family name _____ Given name _____ Title _____

Address _____

ZIP code _____ City _____ Country _____

Email _____ Phone.N° _____ Fax.N° _____

I take the examination for large animals small animals

Examination location: VetSuisse Faculty University Zurich, Switzerland / Dates: July 6-8, 2008

Please read carefully and sign at the bottom:

I hereby apply to sit for the certifying examination of the European College of Veterinary Surgeons (ECVS). This examination will consist of Part I (case based), Part II (practical) and Part III (written). I understand, that I have to pass all three parts to acquire diplomate status of the ECVS. I have only to retake the part(s) of the examination, which I fail. I have the right to take each part a total of 3 times within 4 years after acceptance of my credentials. Should I not pass all three parts within 4 years, I will have to reapply and go through the credentials evaluation process again. With my application I enclose **a recent passport size photograph** (please provide also a high resolution photograph electronically)

The examination fee will be used to pay for the expenses and travelling costs of the examiners and for the administration costs. In case of withdrawal of the application the refunds for the examination fee will be:

– before 8 weeks prior to examination 75% – before 4 weeks prior to examination 50% – less than 4 weeks to examination 0%

I take all three parts and pay EURO € 750.–

I repeat the following part(s) Part I (case based) Part II (practical) Part III (written)

I pay EURO € 750.– for 3 parts € 500.– for 2 parts € 250.– for 1 part

Charge my credit card (Amexco in CHF) American Express Mastercard Visa

Expiry date: Credit card number:

CVC2 (Card validation code 2) (three last digits of the number in the signature field - for Euro/Master and Visa card mandatory)

International payment to European College of Veterinary Surgeons, Union Bank of Switzerland (UBS), 8050 Zurich–Oerlikon, Switzerland

Euro account: IBAN: CH070026926980013802M
 SWIFT/BIC: UBSWCHZH80A

CHF account: IBAN: CH130026926980013801E
 SWIFT/BIC: UBSWCHZH80A

Date _____ Signature _____

Please fax or send form by **March 10** at the latest to:

ECVS, Vetsuisse Faculty University of Zurich, Equine Hospital Winterthurerstrasse 260, CH–8057 Zürich, Switzerland / Fax: +41-44-313 03 84