**APPENDIX II**

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| ***THE AMERICAN COLLEGE OF ZOOLOGICAL MEDICINE*** |

**REAPPLICATION FOR CERTIFICATION EXAMINATION**

(Please submit materials electronically)

 I hereby make reapplication to the American College of Zoological Medicine for examination leading to board certification in Zoological Medicine.

My previous application was submitted and approved by the ACZM Credentials Committee in       (year).

**1. NAME:**

**2. Please indicate which subgroup examination you will take** and in which year (Aquatic Animal, General Zoo, Wildlife Medicine or Zoological Companion Animal.)

**Subgroup Examination to be Taken:**

**Year in Which Exam Will Be Taken:**

**3. HOME ADDRESS:**       (Street)

(City) (State) (Zip)

(Telephone) (FAX) (e-mail)

**4. BUSINESS ADDRESS:**       (Organization)

(City) (State) (Zip)

(Telephone) (FAX) (e-mail)

**5. LICENSE TO PRACTICE:** (**Include Photocopy or scan of Current License**)

(State/Province/Country) (Number) (Current Year)

**6. CURRICULUM VITAE:** Please enclose electronic copy of your **updated** curriculum vitae which must include the following information:

NAME

ADDRESS

EDUCATION

 COLLEGES/DATES/DEGREES

 SPECIAL TRAINING IN ZOOLOGICAL MEDICINE

POSTGRADUATE CONTINUING EDUCATION

SCIENTIFIC AND PROFESSIONAL ORGANIZATIONS

PROFESSIONAL ACTIVITIES

CHRONOLOGICALLY LISTED, INCLUDING JOB TITLE AND SUPERVISOR CONTACT INFORMATION

HONORS

 PROFESSIONAL

 PUBLIC SERVICE

OFFICES HELD

 PROFESSIONAL

 PUBLIC SERVICE

SPECIAL CONTRIBUTIONS TO ZOOLOGICAL MEDICINE

BIBLIOGRAPHY

 1. COMPLETE LIST OF PUBLICATIONS FROM PROFESSIONAL AND/OR SCIENTIFIC JOURNALS, BOOKS, PROCEEDINGS, ETC.

 2. LIST ALL REFEREED (Peer Reviewed) PUBLICATIONS SEPARATELY.

**THIS PAGE MUST BE SIGNED AND SUBMITTED WITH YOUR APPLICATION**

Please sign this page and include in your application (scan and include in electronic submission or fax to secretary)

**7. HAVE YOU EVER BEEN CONVICTED OF A FELONY?**

 **[ ]  No** **[ ]**  **Yes**

If yes, please explain:

**8. HAVE YOU EVER HAD DISCIPLINARY ACTION TAKEN ON YOUR STATE LICENSE?**

**[ ]  No** **[ ]**  **Yes**

If yes, please explain:

**Legal Certification:**

I have read the ACZM constitution and By-laws which were provided to me.

I agree to disqualification from certification, or to forfeiture and return of such certification, in the event that any of the rules governing such certification are violated by me, or that any of the statements herein made by me are knowingly false, or in the event that I violate or do not comply with any of the provisions concerning certification of the Constitution and By-laws of the College.

I agree to hold The American College of Zoological Medicine, its members, examiners, officers and agents free from any damage or complaint by reason of any action they, or any one of them, may take in connection with this application, and/or the failure of said corporation to issue me such certification of qualification or failure to elect me to membership in The American College of Zoological Medicine.

**(Date)**  **(Signature of Applicant)**

**FEES:**

An examination fee of **$1,000.00 (US)** is to accompany the completed application. If payment is submitted and the application is withdrawn prior to the submission deadline, the fee will be refunded minus a $15(US) processing fee.

**ACZM POLICIES ON EXAMINATION FEE REFUNDS AND EXAMINATION DEFERMENT**

**All candidates must take the examination either during the year of application or the year directly following application** unless hardship is considered the primary reason for further examination deferment. If a candidate gives notification to sit the examination in a given year and then withdraws with no clear demonstration of hardship, they will forfeit the examination fee and be required to pay the examination fee again for the year that they will sit the examination. Hardship is defined as illness in the candidate or major illness or death in the immediate family of the candidate. Deferment is defined as allowing the candidate to sit the examination at the next offering of the examination. Should a candidate that defers fail to sit the second opportunity, the examination fee is forfeit. There is no time limit for a candidate that withdraws without deferment. They may sit the examination at any time but will pay a new fee for that opportunity.

**Final Check of Re-Application Packet Before Mailing**

**Your Re-application packet to the Secretary of ACZM must include the following:**

[ ]  1. Completed re-application form.

[ ]  2. Current (Updated) Curriculum Vitae with required information.

[ ]  3. Photocopy of current license(s) to practice veterinary medicine.

[ ]  4. Signed and dated legal statement (application questions #7 & 8).

[ ]  5. The examination fee of $1,000.00 (US) paid online. Scan and include the receipt with your re-application.

**** **PLEASE REMEMBER TO SEND ALL RE-APPLICATION MATERIALS TO THE ACZM SECRETARY **

**Applications must be complete and email dated by 31 March of the year of the application.**