

**THIS FORM MUST BE SENT TO THE BOARD DIRECTLY FROM THE
RECOMMENDING VETERINARIAN**

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Recommendation for Registration as an Equine Dental Technician

Regulations of the Board of Veterinary Medicine require that a person applying for registration as an equine dental technician must provide a recommendation from at least two veterinarians licensed in Virginia who attest that at least 50 percent of their practice is equine; and that they have observed the applicant and can attest to his competency to be registered.

Name of Applicant for Registration _____

1. Please provide a summary of your observation of this applicant performing tasks relating to the practice of equine dentistry. Include the types of tasks you have observed the applicant performing (i.e., planing and leveling of equine teeth using nonmotorized tools; planing or leveling using motorized tools, or the extraction of wolf teeth premolars) and approximately how often you have observed the applicant and over what period of time. **Respond on a separate sheet and attach to this form.**

2. Please evaluate the applicant: (Please indicate with check mark)

		Poor	Fair	Good	Superior
Professional knowledge					
Skill level					
Ethical/professional conduct					

3. Recommendation: (please indicate with check mark)

- Recommend highly and without reservation ;
- Recommend as qualified and competent
- Recommend with some reservation (explain)

I attest that at least 50 percent of my veterinary practice is equine and that the statements made in this recommendation are true to the best of my knowledge.

Date: _____ Signed by: _____

Print or type name: _____

Virginia veterinary license number: _____

(This report will become a part of the applicant's file and may be reviewed by the applicant upon request.)