

APPLICATION FOR TRANSFER

Level 1 Official Veterinarian



Applicant's Details *(to be checked against Database profile)*

Surname		Name	
FEI ID No.		Email	
Phone No.		Mobile No.	
Address			

Professional Experience

Number of years as equine veterinary practitioner

** A minimum of 3 years is required*

Declaration

By ticking the following boxes, I declare that:

<input type="checkbox"/>	I understand English, both written and spoken
<input type="checkbox"/>	I am a licensed veterinarian in the country of my National Federation
<input type="checkbox"/>	I am currently listed as an FEI Permitted Treating Veterinarian
<input type="checkbox"/>	I am in good standing with my National Federation
<input type="checkbox"/>	I am familiar with the FEI General Regulations, FEI Veterinary Regulations, EADCM Regulations and FEI Discipline Rules
<input type="checkbox"/>	I accept the FEI Officials' Code of Conduct (<i>Annex H, FEI General Regulations</i>)

Date of application:

Please return your application form to your National Federation. Contact details can be found in the [Education section](#) of the FEI website.