



THE STATE
of

ALASKA *Department of Commerce, Community, and Economic Development
Division of Corporations, Business and Professional Licensing*

Board of Veterinary Examiners

PO Box 110806, Juneau, AK 99811

Phone: (907) 465-2550

Email: BoardOfVeterinaryExaminers@Alaska.Gov

Website: ProfessionalLicense.Alaska.Gov/BoardOfVeterinaryExaminers

Veterinary Student Permit Application Instructions

An individual must hold a veterinary student permit before beginning an externship in the state per 12 AAC 68.500 and 08.98.188.

A student permit issued under this section is nonrenewable and is valid for one year from the date of issue or until the date of the applicant's graduation from the applicant's accredited college of veterinary medicine, whichever occurs first.

Please read the application, statutes, regulations, and all instructions carefully. It is your responsibility to be aware of licensing requirements and provide all necessary documentation. No permit will be issued until your application file is complete.

The following must be received by the division before your application for Veterinary Student Permit can be reviewed:

1. APPLICATION

A signed, completed application (#08-4534, pages 1-2).

2. FEES

Fees made payable to "State of Alaska."

Nonrefundable Student Permit Fee: \$125.00

Total Fees Due: \$125.00

3. DECLARATION OF SPONSORSHIP

Completed and signed Declaration of Sponsorship of Veterinary Student form (#08-4534a).

4. VERIFICATION OF EDUCATION

A Verification of Education and Good Standing form (#08-4534b) received by the division from the dean of the applicant's veterinary school, verifying applicant is in fourth year of veterinary school.

General Information

APPLICATION PROCESSING:

The average time to process a paper application varies by program but can take several weeks from the date it is received in this office complete with all correct forms, supporting documents and appropriate fees paid. When the application is complete and correct, and all supporting documents have been received and all fees have been paid, the license will be issued. Start the process far enough in advance to allow for processing time. Applications are reviewed in order of receipt in our office, and walk-in customers should not expect immediate review.

ADDRESS OR NAME CHANGE:

In accordance with 12 AAC 02.900, it is the applicant's/licensee's responsibility to notify the Division, in writing, of changes of address or name. Name and address change notification forms are available on the Division's website. The address of record with the division will be used to send renewals and all other official notifications and correspondence. The name appearing on the license must be your current legal name.

SOCIAL SECURITY NUMBERS:

AS 08.01.060 and 08.01.100 require that a U.S. Social Security Number be on file with the division before a professional license is issued or renewed for an individual. If you do not have a U.S. Social Security Number, please complete the Request for Exemption from Social Security Number Requirement form (#08-4372) located at ProfessionalLicense.Alaska.Gov or contact the division for a copy of the form. This form is required with every application if you do not have a U.S. Social Security Number.

PUBLIC INFORMATION:

Please be aware that all information on the application form will be available as a public record, unless required to be kept confidential by state or federal law.

ABANDONED APPLICATIONS:

Under 12 AAC 02.910, an application is considered abandoned when 12 months have elapsed since correspondence was last received from or on behalf of the applicant. An abandoned application is denied without prejudice. At the time of abandonment, the division will send notification to the last known address of the applicant, who has 30 days to submit a written request for a refund of biennial license and other fees paid. The application fee will not be refunded. If no request for refund is received within that timeframe, no refund will be issued, and all fees will be forfeited.

PAYMENT OF CHILD SUPPORT:

If the Alaska Child Support Enforcement Division has determined that you are in arrears on child support, you may be issued a nonrenewable temporary license valid for 150 days. Contact Child Support Services at (907) 269-6900 to resolve payment issues.

STATUTES AND REGULATIONS:

The complete set of statutes and regulations for this program are available by written request or online at the division's website: ProfessionalLicense.Alaska.Gov

If you would like to receive notice of all proposed regulation changes for your program, please send a request in writing with your name, preferred contact method (mail or email), and the specific program you want to be updated on to the address below.

Regulations Specialist

Department of Commerce, Community, and Economic Development

Division of Corporations, Business and Professional Licensing

EMAIL: RegulationsAndPublicComment@Alaska.Gov

Statutes

12 AAC 68.500. Student permit. (a) The board will issue a student permit to an applicant who meets the requirements of AS 08.98.188 and this section.

(b) An applicant for a student permit under this section must submit to the department

(1) a complete application, on a form provided by the department;

(2) the applicable fees established in 12 AAC 02.350;

(3) a letter of good standing from the dean of the applicant's accredited college of veterinary medicine

verifying the applicant is in the applicant's fourth year of veterinary school; and

(4) a signed sponsor statement from a veterinarian licensed in this state stating that the veterinarian will supervise the student as specified in AS 08.98.188

(c) A student permittee must be sponsored by a specific veterinarian licensed in this state, but may work under the appropriate supervision of another veterinarian licensed in this state in the same practice as the sponsor.

(d) A student permit issued under this section is nonrenewable and is valid for one year from the date of issue or until the date of the applicant's graduation from the applicant's accredited college of veterinary medicine, whichever occurs first per AS 08.98.050 and AS 08.98.188.



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VET

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Website: ProfessionalLicense.Alaska.Gov/BoardOfVeterinaryExaminers

Veterinary Student Permit Application

PART I Payment of Fees

Required Fees:	<input type="checkbox"/> Student Permit Fee (\$125 is Non-Refundable)	\$125.00
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PART II Personal Information

Full Legal Name:			
Provide all other names used (maiden, nicknames, aliases). If any documentation will be received in a prior name, you must provide a certified true copy of the documentation showing proof of legal name change(s).			
<input type="checkbox"/> Not Applicable <input type="checkbox"/> Other Names Used: _____			
Mailing Address:	P.O. Box or Street	City	State Zip
Contact Phone:		Date of Birth:	
EMAIL AGREEMENT: By choosing to receive correspondence on any matter affecting my license or other business with the Alaska Division of Corporations, Business and Professional Licensing, I agree to maintain an accurate email address through the MY LICENSE web page. I understand that failure to check my email account or to keep the email address in good standing may result in an inability to receive crucial information, potentially resulting in my inability to obtain or maintain licensure.			
Email Address:		Select One:	<input type="checkbox"/> Send my Correspondence Electronically <input type="checkbox"/> Send my Correspondence by Mail
<i>Note: If both boxes are selected above, you will receive correspondence electronically.</i>			
SOCIAL SECURITY NUMBER: AS 08.01.060 requires you to provide your United States Social Security Number. It is considered confidential information and will not be publicly disclosed; it may be used to verify inter-state licensure.			

PART III Education

Name of School	City and State	Date Attended From (mm/yyyy)	Date Attended To (mm/yyyy)

PART IV Alaska Law

I hereby certify I have reviewed, understand and will abide by the statutes and regulations applicable to my profession (AS 08.98 and 12 AAC 68).



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Signature Page

Applicant Name:		
Alaska License Number (if known):		<input type="checkbox"/> <i>Application in Process</i>

PART V Agreement

I hereby certify that I am the person herein named and subscribing to this application and that I have read the complete application, and I know the full content thereof. I declare that all of the information contained herein, and evidence or other documents submitted herewith are true and correct.

I understand that any falsification or misrepresentation of any item or response in this application, or any attachment hereto, or falsification or misrepresentation of documents to support this application, is sufficient grounds for denying, revoking, or otherwise disciplining a license, certificate, or permit to practice in the state of Alaska.

I further understand that it is a Class A misdemeanor under Alaska Statute 11.56.210 to falsify an application and commit the crime of unsworn falsification.

Applicant Signature:		Date Signed:	
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Declaration of Sponsorship of Veterinary Student Externship

➔ **Applicant:** Complete the identifying information below and forward a copy of this form to the sponsoring veterinarian.

Applicant Name:		Date of Birth:	
Applicant Signature:		Date Signed:	

➔ **Sponsor:** Provide the information requested below for the applicant identified in this form and return the form directly to the Alaska State Board of Veterinary Examiners at the letterhead address.

Sponsor Name:		License Number:	
Sponsorship Start Date:		Sponsorship End Date:	
Practice Name:			
Email:		Phone:	
<input type="checkbox"/> I will be directly supervising this student. -OR- <input type="checkbox"/> Another licensed veterinarian at this practice will be directly supervising this student.			
Supervisor Name:		License Number:	
Is the supervising veterinarian listed supervising another student at any point during the time frame listed?	<input type="checkbox"/> Yes <input type="checkbox"/> No		
<i>If yes, please explain the plan to comply with 08.98.188(c)(3) 'not more than one student permit holder at a time may be under the direct supervision of a veterinarian licensed in this state'.</i>			

<input type="checkbox"/> I hereby certify I have reviewed, understand and will abide by AS 08.98.188 in my role as sponsoring veterinarian.

Signature

I hereby certify that the above information is true and complete to the best of my knowledge.

Sponsor Name:

Sponsor Signature:

Date Signed:

Sec. 08.98.188. Student permit. (a) The board may approve the issuance of a student permit to a student enrolled in and in good standing at an accredited college of veterinary medicine who has completed three years of study and is participating in an externship program as part of the college's educational curriculum.

(b) A student permit is valid for not longer than one year and may not extend beyond the student's graduation.

(c) A holder of a student permit is subject to the following limitations:

(1) assistance in diagnosis and surgery must be under the immediate supervision of a veterinarian licensed in this state;

(2) assistance in treatment must be under the direct or indirect supervision of a veterinarian licensed in this state;

(3) not more than one student permit holder at a time may be under the direct supervision of a veterinarian licensed in this state; and

(4) a veterinary practice may not retain more than two student permit holders at a time.

(d) The board shall establish requirements for student permits by regulation.

(e) A person holding a permit under this section is not subject to provisions of this chapter other than this section.

(f) In this section,

(1) "direct supervision" means the supervising veterinarian is on the premises where the animal is being treated and is quickly and easily available;

(2) "immediate supervision" means the supervising veterinarian is in the immediate area and within audible and visual range of the animal patient and the person treating the patient;

(3) "indirect supervision" means the supervising veterinarian does not need to be on the premises but has given either written or oral instructions for the treatment of the animal;

(4) "veterinary practice" means a business that provides veterinary services.



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Verification of Education and Good Standing

→ **Applicant:** Complete the identifying information below and forward a copy of this form to the Dean of your AVMA accredited veterinary school where your degree is being pursued.

Applicant Name:		Date of Birth:	
Applicant Signature:		Date Signed:	

→ **School:** Provide the information requested below for the applicant identified in this form and return the form directly to the Alaska State Board of Veterinary Examiners at the letterhead address.

School Name:			
Start Date of Program:		Expected Graduation Date:	
<input type="checkbox"/> I hereby certify that the student named above is a veterinary student in their fourth year of education			

Signature

School Seal	Signature:		Date Signed:	
	Printed Name:		Title:	
	Email:		Phone:	



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Credit Card Payment Form

All major credit cards are accepted. For security purposes, do not email credit card information. Include this credit card payment form with your application.

Name of Applicant or Licensee:			
Profession Type (e.g., Acupuncture):		License Number (if applicable):	
I wish to make payment by credit card for the following (check all that apply):			AMOUNT
<input type="checkbox"/>	Application Fee:		
<input type="checkbox"/>	License or Renewal Fee:		
<input type="checkbox"/>	Other (fine, exam, etc.):		
1.			
2.			
			TOTAL:

Name (as shown on credit card):			
Mailing Address:			
Phone Number:		Email (Optional):	
Signature of Credit Card Holder:			

CREDIT CARD INFO: Your payment cannot be processed unless all fields are completed.

1. Credit Card Number:		All 3 fields MUST be completed. This section will be destroyed after the payment is processed.
2. Expiration Date:		
3. Security Code:		