INSTRUCTIONS FOR LICENSE APPLICATION ---READ CAREFULLY

1. Fill out exactly as you wish your name to appear on your license. Maiden name is for our records only.

2. Be sure to use a complete and current address for the time of the application process. If more than one address will be used in the next 60 days, include the second address on an enclosure with an explanation.

3. KSA 74-139 says that upon request of the Director of Taxation, the board is required to provide the name, social security number, and address of the license holders in the state. The social security numbers are used by this agency for identification and the Professional Examination Service asks for the social security numbers for their identification. You may legally decline to disclose this number.

4. Be able to verify verbally if asked by the board. Federal law prohibits state licensing agencies from licensing certain aliens. 8 U.S.C. § 1621.

5. Personal data for identification purposes

6. The complete date please. Enclose photocopy of diploma. Please provide a copy of diploma if already graduated or; if enrolled in AVMA accredited college, a letter from Dean's office verifying enrollment or; if enrolled in non-accredited college, a letter from ECFVG verifying enrollment and completion of steps 1, 2, & 3.

7. List all licenses, whether active or inactive.

8., 9.,10. The board requires complete information on all areas of the application. Attach extra sheets as needed. If asked by board, this information must be verifiable.

11. This photo should have your face size a minimum of 1 inch and the overall photo size should not exceed 3 x 4 inches. Poor quality photos, snapshots, group pictures, caps or hats obscuring parts of the face, and colored glasses will cause photos to be rejected.

12. Read the affidavit. It is your oath carrying with it the penalty of law, and must be witnessed.

13. It is your duty to contact the other states in which you are, or ever have been, licensed and have them send their verification directly to our board.

14. Explain any YES answers in detail.

15. Unless taken in Kansas, the scores from the NAVLE, or NBE (National Board Examination) and the CCT (Clinical Competency Test), must be forwarded to the board by VIVA (Veterinary Information Verification Agency), a service provided by AAVSB (American Association of Veterinary State Boards). Applicants graduated prior to 1980 are exempt from CCT. E-mail: viva@aasvb.org; AAVSB website: http://www.aavsb.org/VIVA

16. When the Applicant State of Confidentiality is signed and returned, to our office, with a completed application and appropriate fees, you will be sent an open book Kansas jurisprudence examination. You must correctly answer 90% of the questions on this open book exam. If you do not correctly answer 90% of the questions, you must retake the examination. Please print the following forms, complete as directed, and submit with your application.

Applicant Statement of Confidentiality and Certificate of Moral Character

17. Attach application fee of $125.00. No cash accepted. Make your check payable to: Kansas Board of Veterinary Examiners

APPLICATION FEE OF $125.00 IS NOT REFUNDABLE.

KANSAS BOARD OF VETERINARY EXAMINERS
PO Box 379
Wamego, Kansas 66547-0379
PHONE: 785-456-8781
APPLICATION FOR KANSAS VETERINARY LICENSE
(Please Type or Print Legibly)

1. NAME______________________________________________________________________________________
   Last    First    Middle Initial    Maiden

2. ADDRESS___________________________________________________________________________________
   Street/Box    City    State    Zip
   E-mail Address: _____________________________________________________________________

3. TELEPHONE #___________________________ SOCIAL SECURITY # ________________________________

4. BIRTH DATE____________ DRIVER’S LICENSE#_____________________ U.S. CITIZEN ___Yes ___No

5. HEIGHT___________ WEIGHT_____________ COLOR OF HAIR__________ AND EYES___________
   DISTINGUISHING SCARS AND/OR MARKS, give description and location_______________________
   ______________________________________________________________________________________

6. VETERINARY COLLEGE & GRADUATION DATE _______________________________________________

7. OTHER LICENSES HELD_____________________________________________________________________

8. DEA NUMBERS HELD________________________________________________________

9. U.S.D.A. ACCREDITATIONS HELD_____________________________________________________________

10. LIST PREVIOUS VETERINARY EXPERIENCE OR EMPLOYMENT BELOW: (most recent first)
     from _____________ to _____________ (present)
     from _____________ to _____________
     from _____________ to _____________
     from _____________ to _____________
     from _____________ to _____________

11. ATTACH A PASSPORT PHOTOGRAPH TAKEN WITHIN THE LAST SIX MONTHS TO THE LEFT MARGIN OF THIS FORM AT THIS LEVEL

12. AFFIDAVIT OF APPLICANT:
    I solemnly swear that all information on this application is true, correct and complete in every respect and when
    granted a license to practice veterinary medicine in the State of Kansas, I will abide by the Kansas veterinary law
    and adhere strictly to the ethics of the profession.
    _______________________________ DATE_____________________
    Signature of applicant

~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~

STATE OF_________________ COUNTY OF ________________________________ SS.
SUBSCRIBED AND SWORN TO BEFORE ME THIS ____________ DAY OF ______________

_______________________________
(Notary Public)
13. From all states in which you are now or ever have been licensed, you must submit LETTERS OF GOOD STANDING. This verification should be sent directly from the state(s) responding to the Kansas board. Our mailing address is:

Kansas Board of Veterinary Examiners  
PO Box 379  
Wamego, Kansas 66547-0379

14. The following information is required by the Kansas Board for licensure and is true and complete under penalty of law. You must enclose on a separate sheet a complete explanation for any YES answer below.

CIRCLE ONE

YES  NO  1. Are you currently enrolled in an ECFVG program or the holder of an ECFVG certificate?
YES  NO  2. Are you registered or licensed in any other profession?
YES  NO  3. Have you ever been denied licensure to practice veterinary medicine in any state, US territory, or country for any reason other than examination failure?
YES  NO  4. Has your license to practice veterinary medicine from any state ever been subject to any disciplinary action or are any such actions now pending?
YES  NO  5. Have you ever been convicted of any felony or misdemeanor? (exclude minor or juvenile offenses)
YES  NO  6. Have you ever been convicted of a charge of cruelty to animals?
YES  NO  7. Have you received treatment for substance abuse in the last five years?
YES  NO  8. Has the Federal Drug Enforcement Administration ever taken action against, withdrawn or warned you on anything pertaining to your DEA Number?
YES  NO  9. Has there ever been any action taken against or warnings issued to any USDA Accreditation held by you?
YES  NO  10. Have you ever been a defendant or a respondent in any malpractice action?
YES  NO  11. Have you ever voluntarily relinquished or intentionally allowed to lapse any license, accreditation, DEA number or other certificate necessary for the practice of veterinary medicine in order to avoid action against such certificate?
YES  NO  12. Have you ever attended any other college of veterinary medicine than the school from which you are a graduate?
YES  NO  13. Are you now or have you been registered or licensed with any state racing commission?
YES  NO  14. Are you a diplomate of any specialty in veterinary medicine?
YES  NO  15. Are you now using a different name than the name used on any educational and/or professional documents in your past?

THIS APPLICATION SHALL EXPIRE ONE YEAR AFTER IT IS RECEIVED IN THE OFFICE OF THE BOARD OF EXAMINERS.

APPLICATION FEE OF $125 IS NOT REFUNDABLE

Make check payable to:  KANSAS BOARD OF VETERINARY EXAMINERS  
PO Box 379  
Wamego, Kansas 66547-0379  
Phone: 785-456-8781
STATE OF KANSAS
APPLICATION FOR EXAMINATION
CERTIFICATE OF MORAL CHARACTER

1. To be signed by a licensed veterinarian.
2. To be signed by a reputable business or professional person.

1. I hereby certify that I am a licensed veterinarian in the State of ______________________,
my certificate number being__________________ and that I have been acquainted with
______________________________________ for ____________months/years and to the
best of my knowledge and belief, he/she is of good moral character and I hereby recommend
him/her as worthy to take the examination for which he/she is applying.

Name:__________________________________________________________________
(Printed) (Signature)
Address:________________________________________________________________
City, State, Zip:___________________________________________________________

2. I hereby certify that I have been acquainted with _____________________________
(Applicant’s name)
for __________months/years and that to the best of my knowledge and belief, he/she is
of good moral character and (I) hereby recommend him/her as worthy to take the
examination for which he/she is applying.

Name:__________________________________________________________________
(Printed) (Signature)
Address:________________________________________________________________
City, State, Zip:___________________________________________________________

Return this completed form, the application with fee, and other required information to:

Kansas Board of Veterinary Examiners
PO Box 379
Wamego, Kansas 66547-0379
Phone: 785.456.8781
Dear Applicant,

Once we receive your license/registration application and application fee we will send you, via U.S. Mail, an open-book jurisprudence examination for you to take and return to our office. The jurisprudence examination is a requirement for a Kansas veterinary license or veterinary technician registration. **Please sign and date this form which must accompany your application for licensure/registration.**

If you do not return this form with your application, you will be expected to schedule an appointment, to visit our Wamego Kansas office, to take the open-book jurisprudence examination.

**APPLICANT STATEMENT OF CONFIDENTIALITY**

**TO THE KANSAS BOARD OF VETERINARY EXAMINERS**

I hereby attest that I will not copy or divulge the nature or content of any question on the Kansas Veterinary Jurisprudence examination to any individual or entity.

I understand that the Kansas Veterinary Practice Act statutes and regulations governing applications and professional conduct establish that my divulging the nature or content of any question on the examination could constitute the basis for denial of my application.

I understand that failure to sign and return this statement with my application will result in me not receiving the examination through the U.S. Mail and I will be required to schedule an appointment to appear, in person, at the Kansas Board of Veterinary Examiners Wamego Kansas office to sit for the jurisprudence examination.

___________________________________________
Applicant's Printed Name

___________________________________________  __________
Applicant's Signature               Date
STATEMENT OF CITIZENSHIP
OR ALIEN STATUS FOR STATE PUBLIC BENEFITS

Title IV of the federal Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (the "Act"), 8 U.S.C. § 1621, provides that, with certain exceptions, only United States citizens, United States non-citizen nationals, non-exempt "qualified aliens" (and sometimes only particular categories of qualified aliens), nonimmigrants, and certain aliens paroled into the United States are eligible to receive state, or local public benefits. With certain exceptions, a professional license issued by a State agency is a State public benefit.

Directions: All applicants must complete Sections I, II, and IV. Applicants who are not U.S. citizens or nationals must also complete Section III.

Submit this completed form and a copy of one or more document(s) from the attached "Evidence of U.S. Citizenship, U.S. National Status, or Alien Status" with your application for license or renewal. If the document you submit does not contain a photograph, you must also provide a government issued document that contains your photograph. You must submit supporting legal documentation (i.e. marriage certificate) if the name on your evidence is not the same as your current legal name.

SECTION I – APPLICANT INFORMATION

APPLICANT'S NAME (Print or type)__________________________________________________________

TYPE OF APPLICATION (Check one):
    ☐Initial Application
    ☐Renewal

TYPE OF LICENSE/CERTIFICATION (Check one)
    ☐Veterinarian
    ☐Veterinary Technician
**SECTION II – CITIZENSHIP OR NATIONAL STATUS DECLARATION**

Are you a citizen or national of the United States?  □ Yes □ No

If Yes, indicate place of birth:

- City _____________________________________________________________
- State (or equivalent) ________________________________________________
- Country or Territory ________________________________________________

If you are a citizen or national of the United States, go to Section IV. If you are not a citizen or national of the United States, you must complete Section III and IV.

**SECTION III – ALIEN STATUS DECLARATION**

To be completed by applicants who are not citizens or nationals of the United States. Please indicate alien status by checking the appropriate box.

**Qualified Alien Status (8 U.S.C. §§ 1621(a)(1),-1641(b) and (c))**

□ 1. An alien lawfully admitted for permanent residence under the Immigration and Nationality Act (INA).

□ 2. An alien who is granted asylum under Section 208 of the INA.

□ 3. A refugee admitted to the United States under Section 207 of the INA.

□ 4. An alien paroled into the United States for at least one year under Section 212(d)(5) of the INA.

□ 5. An alien whose deportation is being withheld under Section 243(h) of the INA.

□ 6. An alien granted conditional entry under Section 203(a)(7) of the INA as in effect prior to April 1, 1980.

□ 7. An alien who is a Cuban/Haitian entrant.

□ 8. An alien who has, or whose child or child's parent is a "battered alien" or an alien subject to extreme cruelty in the United States.

**Nonimmigrant Status (8 U.S.C. § 1621(a)(2))**

□ 9. A nonimmigrant under the Immigration and Nationality Act [8 U.S.C § 1101 et seq.] Nonimmigrants are persons who have temporary status for a specific purpose. See 8 U.S.C § 1101(a)(15).

**Alien Paroled into the United States For Less Than One Year (8 U.S.C. § 1621(a)(3))**
☐ 10. An alien paroled into the United States for less than one year under Section 212(d)(5) of the INA.

Other Persons (8 U.S.C § 1621(c)(2)(A) and (C)

☐ 11. A nonimmigrant whose visa for entry is related to employment in the United States, or

☐ 12. A citizen of a freely associated state, if section 141 of the applicable compact of free association approved in Public Law 99-239 or 99-658 (or a successor provision) is in effect [Freely Associated States include the Republic of the Marshall Islands, Republic of Palau and the Federate States of Micronesia, 48 U.S.C. § 1901 et seq.];


Otherwise Lawfully Present


SECTION IV - DECLARATION

All applicants must complete this section.

I declare under penalty of perjury under the laws of the state of Kansas that the answers and evidence I have given are true and correct to the best of my knowledge. (K.S.A. 53-601).

APPLICANT’S SIGNATURE ___________________________ TODAY’S DATE ___________________________
EVIDENCE OF U.S. CITIZENSHIP, U.S. NATIONAL STATUS, OR ALIEN STATUS
List A: U.S. CITIZEN OR U.S. NATIONAL

You must submit supporting legal documentation (i.e. marriage certificate) if the name on your evidence is not the same as your current legal name.

Evidence showing U.S. citizen or U.S. national status includes the following:

(1) A Kansas driver license issued after 1996 or a Kansas identification card;
(2) A birth certificate or delayed birth certificate issued in any State, Territory, or Possession of the United States, including the District of Columbia, Puerto Rico (on or after January 13, 1941), Guam, the U.S. Virgin Islands (on or after January 17, 1917), American Samoa, or the Northern Mariana Islands (on or after November 4, 1986, Northern Mariana Islands local time) (unless the applicant was born to foreign diplomats residing in such a jurisdiction);
(3) A United States Certificate of Birth Abroad: Consular Report of Birth Abroad of a Citizen of the United States (FS-240) (issued by the Department of State to U.S. citizens); Certificate of Birth (FS-545) (issued by a foreign service post); or Certification of Report of Birth (DS-1350) (copies of which are available from the Department of State);
(4) A United States passport;
(5) A foreign passport with a United States visa;
(6) * An I-94 Form with a photograph and appropriate stamp as described below;
(7) A United States Citizenship and Immigration Services Employment Authorization Document (* Form I-766 annotated A3, A5, or A10; or * Form I-551: Permanent Resident Card or Alien Registration Receipt Card) or Refugee Travel Document (Form I-571);
(8) A United States Certificate of Naturalization (N-550 or N-570);
(9) A United States Certificate of Citizenship (N-560 or N-561);
(10) A Tribal Certificate of Indian Blood; or
(11) A Tribal or Bureau of Indian Affairs Affidavit of Birth.

An applicant for a license may alternatively submit the following:

(12) A driver license issued by a State that verifies lawful presence in the United States, which does not include Alaska, Hawaii, Iowa, Illinois, Michigan, Montana, North Carolina, Nebraska, New Mexico, Nevada, Oklahoma, Oregon, Rhode Island, Texas, Utah, Vermont, Washington, or Wisconsin.

Acceptable stamps and annotations:
a. “Qualified Aliens”
   Alien Lawfully Admitted for Permanent Residence
   - Unexpired Temporary I-551 stamp in foreign passport or on * Form I-94.
   Asylee
   - * Form I-94 annotated with stamp showing grant of asylum under section 208 of the INA.
   Refugee
   - * Form I-94 annotated with stamp showing admission under § 207 of the INA.
   Alien Paroled Into the U.S. for a Least One Year
   - * Form I-94 with stamp showing admission for at least one year under section 212(d)(5) of the INA. (Applicant cannot aggregate periods of admission for less than one year to meet the one-year requirement.)
   Alien Whose Deportation or Removal Was Withheld
   Alien Granted Conditional Entry
   - * Form I-94 with stamp showing admission under §203(a)(7) of the INA.
   Cuban/Haitian Entrant
   - Unexpired temporary I-551 stamp in foreign passport or on * Form I-94 with the code CU6 or CU7; or
   - Form I-94 with stamp showing parole as “Cuba/Haitian Entrant” under Section 212(d)(5) of the INA.

b. Nonimmigrant
   - * Form I-94 with stamp showing authorized admission as nonimmigrant.

c. Alien Paroled into U.S. for Less than One Year
   - * Form I-94 with stamp showing admission for less than one year under section 212(d)(5) of the INA.

* Indicates a registration document.