

**Veterinary Technology or Assistant Verification of Hours**

Veterinary Technology applicants who have the (50) required hours, or Veterinary Assistant applicants who have the (25) required hours of volunteer, work, or observation experience, must submit this form as part of the application requirements to the program for which they are applying. Volunteer, observing or work must be performed under the supervision of a veterinarian (DVM) or licensed veterinary technician (LVT) at any applicable animal care facility or site, such as a private veterinary practice, clinic, animal shelter, etc. This may be completed at one or more facilities, but a **separate** form must be used for each site.

The DVM or LVT must complete the form and sign it.

Applicant Name: \_\_\_\_\_

Applicant MCC Student ID: \_\_\_\_\_

Name of Facility: \_\_\_\_\_

Facility Address: \_\_\_\_\_  
Street Address City State Zip Code

Facility Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Total number of Experience Hours: \_\_\_\_\_ Please Circle: Observation, Volunteer or  
Paid work experience

Areas of work satisfactorily performed, observed, or discussed:

_____ Anesthesia (induction, maintenance, recovery)	_____ Client interaction
_____ Minor surgery (e.g. laceration repair)	_____ Cleaning (cages, stalls, treatment areas)
_____ Major surgery (e.g. abdominal surgery)	_____ Working hours of a LVT, Assistant
_____ Dental procedures (e.g. cleaning)	_____ Challenges/rewards of profession
_____ Sample collection (e.g. fecal, urine)	_____ Front office procedures
_____ Radiography	_____ Other (grooming, emergency, euth.)
_____ Nursing procedures (e.g. patient care)	_____ Pharmacy (e.g. filling prescriptions)

Signature of DVM/LVT: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_