***(Template: refer to section 3.3 of Fellowship Candidate Handbook for more details)***

**Australian and New Zealand College of Veterinary Scientists**

**Cover Page Application for**

**Training Program Document**

Page 1: Fee

Page 2: Index of requirements

I submit this Training Program Document for Fellowship of the Australian and New Zealand College of Veterinary Scientists.

**Name:**

**Subject:**

**Date:**

**Signature:**

**Postal address:**

**Phone: Email:**

**Method of payment of Part 1 of Fellowship Fee: $**…………..

Cheque enclosed  Mastercard  Visa  Direct Credit

***NB: Payment by Mastercard or Visa will incur a 1.5% administration charge***

**Electronic Transfer of funds:**

Westpac Banking Corporation BSB 034093 Account No. 219081 (For overseas transfer SWIFT No. WPACAU2S). Please indicate your name and subject clearly in the description.

My Credit card number is:

Valid until ......................................………….......... CVV

Name on card ……………………………………………………….

Signature of cardholder ………...................……… Date……………………….………………………

**Index:**

1. **Cover Page for Training Program Document (TPD) stating type of training program for your duration of residency.**

**There are three types of training programs, tick the box to indicate which type of training program you will be engaged in:**

* **Full-time – standard Training Program** (2 – 3 years continuous Directly Supervised Training (DST) for at least 38 hours per calendar week.)
* **Part-time** (In which the candidate is in active training in the chosen discipline for less than 38 hours per calendar week.)
* **Alternative Training Program** (Combination of directly and indirectly supervised training with each duration of DST as a minimum 6 consecutive week blocks.)

**Part-time and Alternative Training Programs cannot be submitted with inclusion of retrospective months of training. All have to be prospective.**

**You must refer to the Fellowship Candidate Handbook, Section 2.3, for full details on each type of Training Program.**

1. **Program Overview.**
2. **Objectives**.
3. **Facilities**.

**🗖 Letter from principal of centre** providing the training facility, giving permission for use of the facility during Training Program. (*see Section 3.3.- 4d*)

1. **Cases / Activities**.
2. **Description.**
3. **Weekly Activities Table.**
4. **Week-by-Week Timetable and Summary of Dates.** *(see College website for suggested template)*
5. **Supplementary Training.**

**🗖** Letter from all Supplementary Training supervisors participating in the training, agreeing to their role as supervisors. Or statement of commitment to complete the necessary supplementary training as required from your relevant subject guidelines. *(see Section 3.3 - 9.1b, 3.3.- 9.2b)*

1. **Supervisors.**

**🗖** Letter from each of Primary supervisor and Secondary supervisor(s) participating in the training, each agreeing to their role as a supervisor. *(see Section 3.3.- 10b, 3.3.-10d)*

**🗖** A signed agreement between the Candidate and the Primary supervisor that meetings will be held annually to evaluate the progress of the candidate. (*10e)*

1. **Activity Log.** *(if applicable to your subject, see relevant subject guidelines) (templates available on College website).*
2. **Cumulative Activity Log Summary.** *(templates available on College website)*
3. **Curriculum Vitae.**

**Please forward all TPD applications to:** [**examinations@anzcvs.org.au**](mailto:examinations@anzcvs.org.au)