***(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 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 Directly Supervised Training (DST) for at least 40 hours per calendar week.)
* **Part-time** (In which the candidate is in active training in the chosen discipline for less than 40 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.** *(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. *(see Section 3.3 - 9.1b, 3.3.- 9.2b)*

1. **Supervisors.**

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

**🗖** A signed agreement between the candidate and the principal 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.**