



**Saskatchewan Association of Veterinary Technologists Inc.**  
**Application to Write**  
**The American Association of Veterinary State Boards (AAVSB)**  
**Veterinary Technicians National Exam (VTNE)**

The sitting of the VTNE takes place the third Friday in January and June each year at Kelsey SIAST Institute, Idylwyld Dr. and 33<sup>rd</sup> St., Saskatoon, SK.

**Requirement:** Applicant **must provide proof** that they are either a student registered in an AHT/VT program **or** have graduated from an AHT/VT program recognized by SAVT.

**Cost:** - A \$50.00 deposit in the form of a personal cheque payable to SAVT is required when registering for the VTNE exam. This money will be held in trust until the date of the exam at which time it will be refunded to the candidate.

- \$210.00 in US funds paid by money order or certified cheque at the time of writing the exam.

Please download, complete and return this application form with your deposit if you wish to write the exam in Saskatchewan. **Deadline for registration is November 15<sup>th</sup> (for the January sitting) and April 15<sup>th</sup> (for the June sitting).** You will be contacted with specific information regarding the exam sitting upon receipt of application.

*Please print clearly:*

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

Address: \_\_\_\_\_ City: \_\_\_\_\_ Prov: \_\_\_\_\_ PC: \_\_\_\_\_

Telephone: Home ( ) \_\_\_\_\_ work ( ) \_\_\_\_\_

Email: \_\_\_\_\_ Cell *optional*( ) \_\_\_\_\_

Last 4 digits of your social insurance number: \_\_\_\_\_

Date of Exam sitting ( ) January ( ) June

College of Graduation: \_\_\_\_\_ Year: \_\_\_\_\_

Have you written the exam before? Yes ( ) No ( ) How many times? \_\_\_\_\_

When? \_\_\_\_\_ Where? \_\_\_\_\_

Do you require special accommodations (large print book, extended testing time, etc.)? Yes \_\_\_ No

If yes, what accommodations are required? \_\_\_\_\_

By signing this form you are giving SAVT permission to share your name and address and last 4 digits of your Social Insurance Number with AAVSB (owners of the VTNE) for their data base.

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

Please forward deposit and application form to:

Susan Thiessen, RVT Box 485 Langham, Sask. S0K 2L0 Email: thiessens@siast.sk.ca

Phone: (306) 659-4654 (day) (306) 283-4446 (evening) Fax: (306) 933-7018