

FORM F

2 copies of
photo

VETERINARY SURGEONS ACT 1974

(SECTION 13 (1))

APPLICATION FOR TEMPORARY PERMIT TO PRACTISE

(To be completed by the applicant in BLOCK LETTERS)

1. Name of applicant :

2. Sex : Male Female

3. Date of birth:

4. Identity Card no. / Passport no. :

5. Residential address:

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.....

.....

6. Correspondence address *(if different from residential address)*:

.....

.....

.....

7. Telephone No. :(House)

(Office)

..... (Mobile)

8. Fax no. :

9. E-mail address :

PARTICULARS OF QUALIFICATION

1. Country in which qualification is granted :

2. Institution granting the qualification :

3. Description of qualification :

4. Date of qualification :

REGISTRATION IN OTHER COUNTRIES (if applicable)

Registered as a veterinary surgeon by *(state the country, name of the registration board)*

.....

Date registered: Registration no. :

Other professional qualifications :

Training/Other professional affiliation:

PURPOSE OF APPLYING AND DURATION OF PRACTICE APPLIED

Purpose:

.....

.....

Duration of practice applied for *(not exceeding six months)* :

.....

DECLARATION OF APPLICANT

I hereby attach the original copy of the letter of good professional standing from the Veterinary Council of origin country where I practised and the copy of the following documents certified by a commissioner of oath or any public servant from Professional and Management Group or advocate and solicitor:

- (a) the certificate of qualification;
- (b) the certificate of registration as a veterinary surgeon where the qualification was granted *(if applicable)*;
- (c) the Identity Card/Passport; and
- (d) any other relevant documents which the Council may request.

I declare that —

- (a) I am currently practising as a veterinary surgeon under the name of *(state the name of the practice)* in *(state the name of country)* and hold the title/position of from/since *(state the date(s))*.

(b) my presence in Malaysia is under the sponsorship of
.....
.....
.....
.....
.....
.....(state the name and address of the sponsor).

(c) I am required to be in Malaysia for days in one calendar year where my presence is considered necessary in connection with the proposed project or activity for which I am being considered that is:
.....
..... (state the name and description of the project or activity) and my position will be as
.....

(d) the anticipated date when I am required to be in Malaysia is
..... and the expected date of my departure is
.....

My contact address, fax number, telephone number and e-mail in Malaysia are as follows:

(1) Address:
.....
.....

(2) Telephone no. : (House) (Mobile)
..... (Office)

(3) Fax no. : (4) E-mail address :

I further declare that information provided above are true and I accept the condition that if my application is approved, I shall be bound by the conditions and restrictions that are stipulated in respect of the temporary permit to practise as follows:

- (a) My professional activities shall be limited to the approved premises/scope/project/activity for which my presence in Malaysia is considered to be necessary;
- (b) While I am in Malaysia, I shall not receive, process or undertake any enquiry or project beyond those activities directly related to the approved premises of veterinary practice of my sponsor; and
- (c) I shall be bound by all the requirements under the Veterinary Surgeons Act 1974 [Act 147], its regulations, circulars or guidelines including the Guidelines of Professional Conduct and Ethics for Veterinary Surgeons set out by the Malaysian Veterinary Council.

Signature of Applicant : Date :

Signature of sponsor (*if applicable*) :

Name of sponsor :

Designation :

Date :

Malaysian Veterinary Council Registration no. :

Annual Practicing Certificate no. and date of validity:

Note: This application shall be accompanied by payment in cash/money order/bank draft/ bankers cheque made payable to "Malaysian Veterinary Council".