

**WORK EXPERIENCE REPORT  
FOR THE VETERINARY TECHNOLOGY APPLICANT**

**(To be completed by a practising veterinarian or RVT)**

As a condition of acceptance into the Veterinary Technology program at RIDGETOWN CAMPUS candidates must have obtained work experience with a practising veterinarian. An example of suitable work experience would include voluntary (or remunerative) assistance in a veterinary practice for a minimum time period of 40 hours (observing surgery, assisting with animal restraint, observing office calls or farm calls, etc.) to become thoroughly familiar with medical technology as it applies to animals. It is not necessary for the candidate to develop specific skills at this time (eg. radiograph, CBC's, surgical assistance, etc.). Hours completed in an OSPCA or Humane Society are not considered for this purpose.

\_\_\_\_\_  
(name of candidate) (date)

\_\_\_\_\_  
(address of candidate)

Length of work experience \_\_\_\_\_ (please specify hours, days, weeks or months)

**FULL-TIME EMPLOY.**  **CO-OP PLACEMENT**  **VOLUNTEER**  **PART-TIME EMPLOY.**  (# /hrs./wk. \_\_\_\_)

**Date that Work Experience was completed** (write "on-going" if still working): \_\_\_\_\_

**Please check the following:**

	Good	Average	Improvement Needed
Communicates well with workers, clients	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Takes initiative without being told	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to listen and follow instructions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Demonstrates manual dexterity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Understands need for good personal appearance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Accepts constructive criticism	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Dependable and punctual	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**COMMENTS:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
(Name of Veterinarian; Veterinary Clinic Name and Phone Number – record on line ABOVE)

\_\_\_\_\_  
(Location (CITY) of veterinary clinic/hospital)

\_\_\_\_\_  
(Signature of person completing form)

\_\_\_\_\_  
(Please PRINT name)

*Return this form by fax or mail, directly to:*  
**Registrar's Office**  
**University of Guelph, Ridgetown Campus**  
**120 Main Street East**  
**RIDGETOWN, ON N0P 2C0**  
**Fax:(519)674-1650**  
**Phone:(519)674-1500 ext.63610**

APPLICANT NAME: \_\_\_\_\_

### LIST OF PROCEDURES OBSERVED / ASSISTED WITH

We would like students to have a broad exposure to many aspects of Veterinary Technology before applying to the program. Since the program is over-subscribed, and since we cannot admit students after the semester has started, we hope this will ensure students are fully aware of what is entailed before a position is offered in the program.

The list below includes a number of procedures we hope students will be exposed to prior to admission. Please indicate whether or not the student has observed or assisted in the procedure. (Note: we realize in most cases students will be observing rather than assisting.)

Please note that it is not mandatory to have observer/assisted with ALL of the procedures listed below.

Procedure	Observed	Assisted
Restraint of dogs		
Restraint of cats		
Restraint of "pocket pets"		
Restraint of cattle		
Restraint of horses		
Restraint of other large animals		
Admission/discharge of patients		
Anesthesia		
Dentistry		
Major Surgical Procedures (ie. Dog spay, orthopedics, etc.)		
Minor Surgical Procedures (ie. Cat neuter, abscess repair, etc.)		
Radiography		
Urinalysis		
Hematology		
Parasitology		
Clinical Chemistry		
Emergency Treatment		
Euthanasia		
Nursing Techniques (ie. Oxygen therapy, fluid therapy, etc.)		