

**APPLICATION FOR REGISTRATION TO PRACTISE A PARA-VETERINARY OCCUPATION:
LABORATORY ANIMAL TECHNOLOGIST (LATs)**

PLEASE NOTE: THIS FORM MUST BE SENT WITH THE FOLLOWING DOCUMENTATION

- Certified copy of your identity document/passport,
- Certified copy of qualification/s
- Proof of payment for the application fee. (Use your initial and surname as payment reference)
**Crossed cheques or EFT must be paid into the South African Veterinary Council bank account:
ABSA, Hatfield Branch (Branch Code 335 545), Account No. 020166762.**

THIS FORM AND SUPPORTING DOCUMENTS AS LISTED ABOVE MUST BE E-MAILED TO: student.registration@savc.org.za

A. TYPE OF REGISTRATION REQUIRED (please mark applicable block with X):

to practise as a Laboratory Animal Technologist (LAT)	R811	
to practise as a Competence Specific [CSR] Or Restricted LAT	R811	
RE-REGISTRATION to practice a Laboratory Animal Technologist (LAT) [After being removed from the register for a period of less than [3] three-years lapsed]	R3 172	

ONLY APPLICABLE TO COMPETENCE SPECIFIC [CSR] OR RESTRICTED REGISTRATION – PLEASE SPECIFY:

AREA OF COMPETENCE	
SPECIFIC SCOPE OF PRACTICE	
SPECIFIC EMPLOYER	

B. PERSONAL DETAILS

FULL NAMES AND SURNAME [AS PER ID]			
DATE OF BIRTH			
ID OR PASSPORT NO.			
NATIONALITY		HOME LANGUAGE	
GENDER		RACE	
CELL NO.		EMAIL ADDRESS	
RESIDENTIAL ADDRESS		POSTAL ADDRESS (If different from postal address)	

C. QUALIFICATIONS OBTAINED AND CERTIFIED COPIES ATTACHED:

QUALIFICATION OBTAINED:	NAME OF UNIVERSITY / INSTITUTION	DATE OBTAINED
1.		
2.		
3.		

D. EMPLOYMENT DETAILS:

NAME OF EMPLOYER / FACILITY	
EMPLOYMENT SECTOR	
PHYSICAL ADDRESS	
OFFICE NUMBER	
WORK EMAIL (If different from personal email)	

E. PROOF OF PAYMENT ENCLOSED: R_____.

Please attach copy of electronic transfer page or deposit slip. Please use your Surname & Initials as payment reference.

F. DECLARATION

a) Have you been prosecuted / convicted of a criminal offence?

Yes _____ No _____. If YES, please furnish the particulars _____

b) Have you been dismissed from employment?

Yes _____ No _____. If YES, please furnish the particulars _____

I declare that the above information is true and correct and that I have never been discharged from a position of trust because of improper conduct and that I have never been convicted of blackmail, bribery, theft, fraud, forgery or the uttering of a forged document or perjury and been sentenced to imprisonment without the option of a fine.

ANY DISHONESTY IN THE COMPLETION OF THIS FORM WILL BE CONSIDERED A SERIOUS OFFENCE

SIGNATURE

DATE