

Application for University Student Veterinary Science Clinic Placement

Given Name _____

Family Name _____

Contact Phone Number _____

Email Address _____

Name of University you are studying at _____

Year 1st 2nd 3rd 4th 5th

Placement Dates

From _____ to _____

Preferred Clinic to do placement

- Ayr
- North Shore (Townsville)
- Hinchinbrook (Ingham)
- Tully
- Innisfail



Will you require accomodation for the term of the placement? Yes No

Do you need to focus on

- Small Animal Large Animals Mixed Animals

Any addition information you want to include in this application: _____

I understand that Tropical Vets will confirm in writing my placement and until I receive this notification my placement dates and clinic I have requested is not guaranteed.
I agree to allow staff from Tropical Vets to contact me regarding this request.

Authorised or Electronically Signed by applicant _____

Date _____

Office Use Only

Approved Not approved

Reason for non approval: _____

Signed: _____ Date: _____

Date added to Placement Calendar

Date added to Vision

Date Clinic&Director notified by email

Date applicant was notified by email