Promotion to 3\* Endurance Veterinary Treatment Official

Applicant’s Details

|  |  |  |  |
| --- | --- | --- | --- |
| Name  |       | Surname |       |
| Date of Birth |       | Nationality |       |
| FEI ID No. |       | Email |       |
| Phone No. |       | Mobile No. |       |
| Address |       |

Criteria for Promotion

[ ]  I have officiated as a 2\* EVT at a minimum of 4 CEIs (1\*/CEN equivalent or 2\* level):

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Year | Place | Event Type | Function |  |
|       |       |       |       |
|       |       |       |       |
|       |       |       |       |
|       |       |       |       |

[ ]  I completed an advanced course in the treatment of competition horses, in particular Endurance horses, approved by the Endurance Technical Committee (please provide a proof of attendance):

|  |  |  |
| --- | --- | --- |
| Year | Place | Course Director |
|       |       |       |

[ ]  I have submitted a CV with 2 references demonstrating case exposure and skills in the treatment of the disease of Endurance horses to be presented to the Endurance Technical Committee.

Declaration (please tick the boxes if true)

With my signature, I confirm that:

[ ]  I have read and understood the current version of the [FEI Endurance Regulations](http://inside.fei.org/fei/regulations/endurance)

[ ]  I have read and understood the current version of the [FEI Veterinary Regulations](http://inside.fei.org/fei/regulations/veterinary)

[ ]  I acknowledge and accept the FEI Code of Conduct (first section, FEI Veterinary Regulations)

[ ]  I have read and understood the current version of the [FEI Equine Anti-Doping and Medication Control Regulations](http://inside.fei.org/content/anti-doping-rules)

[ ]  I am aware of the [FEI Clean Sport webpage](http://inside.fei.org/fei/cleansport/horses) and the [Veterinary section of the FEI website](http://inside.fei.org/fei/your-role/veterinarians)

[ ]  The information provided in the present application is correct and true

|  |  |  |  |
| --- | --- | --- | --- |
| Date  |       |  Applicant’s Signature |       |

***Please return your filled in and signed application form and supporting documents to your National Federation. Contact details can be found in the*** [***FEI Database***](https://data.fei.org) ***under National Federations.***

 **FOR THE NATIONAL FEDERATION’S USE ONLY**

The National Federation of  hereby certifies that the above-mentioned information is correct and true and wishes to nominate Dr  for promotion to 3\* Endurance Veterinary Treatment Official.

NF Official Representative

|  |  |  |
| --- | --- | --- |
| Name  |       |  |
| Date  |       |  Stamp and Signature |       |

 ***Please return the filled in, stamped and signed application form and supporting documents to the FEI Veterinary Department by email to*** ***anne.pellaud@fei.org*** ***or by fax to +41 310 47 60.***