

Student's Record of Veterinary Nurse Training

This is an important document

It provides essential evidence of training required by the Royal College of Veterinary Surgeons in order to process an application for entry to the Register of Veterinary Nurses.

The information and signatures herein will be subject to audit checks

Name:	
Enrolment Number:	

This Record of Education and Training must provide evidence that you have completed the mandatory period of veterinary nurse education and practical training, as set out in the *Veterinary Nurse Registration Rules*.

- You must show that you have completed a minimum of **2990 hours** in training as part of an accredited further or higher education qualification. *This includes **both** your practical experience whilst employed, or on placement from your college, in an approved training practice **and** your time attending college.*
- Your training programme must include a minimum of **1800 hours** employed, or on placement, in an approved training practice **in addition to your taught university or college course.**

Your period of practical training shown in this record must be based on your **normal contracted or agreed working hours** and must exclude your annual leave, and other absences including sick leave and bank holidays, overtime and on call time.

Checklist – please complete this before submitting to the RCVS

1	Record of Practical Training signed and dated by Training Practice Principal	
2	Record of Absence signed and dated by Training Practice Principal	
3	Record of Education signed and dated by Head of Centre	
4	All amendments/alterations to record countersigned and re-dated by TPP (or Head of Centre where appropriate)	
5	No photocopied records included	
6	No training time counted prior to enrolment date	
7	No fields left blank	

Summary of Veterinary Nurse Training

	Final Weeks	Final Hours
Training in Practice		
Training in College	N / A	
Total time:		
I hereby confirm that I have completed the required 2990 hours in Veterinary Nurse Training, at least 1800 hours of which were completed in an approved training practice.	Signature of student:	

Student's record of Practical Veterinary Nurse Training

This record must be kept up-to-date by the student. It should be signed by the **Training Practice Principal** of the **approved Training Practice** in question when:

- The student **leaves employment or placement** at a Training Practice (TP) and/or
- The student **completes attendance** at a higher education or full-time veterinary nursing course

The signatory should ensure that all data entered on this record is accurate. Signatures are routinely checked and audited.

If you are unsure who your Training Practice Principal is, please contact the Veterinary Nursing Department at the RCVS for advice.

Surname:	
Forename(s):	

Enrolment no:		Date of enrolment:	
Level 3 Diploma students only:	Employed student	Placement student	

Please ensure:

- All amendments made to entries on the Record of Training or absence are countersigned and re-dated by the Training Practice Principal (or Head of Centre where appropriate)
- The 'from' date for practical training does not precede your enrolment date
- The hours per week do not include on-call, overtime or breaks
- All dates given are specific (dd/mm/yyyy)
- All signatures provided are original and not photocopied

Name and full address of Training Practice including postcode: <i>This MUST be the veterinary practice where the student is working. Time spent in unapproved branch surgeries cannot be counted towards veterinary nurse training.</i>	Period of employment or practical placement as an enrolled student <i>Please give exact dates</i>		A Number of weeks	B Absence during this period <i>(divide days by 5 to give weeks absent)</i>		C Full weeks counting towards training <i>(A minus B2)</i>	D Hours Per Week <i>(excluding on-call or overtime)</i>	E Total hours counting towards training <i>(C x D)</i>	Signature of Training Practice Principal <i>I certify that, to the best of my knowledge and belief, the above named student completed the period of clinical training indicated in column C</i>	Date of Principal signing (to be completed by Principal)
	From	To		B1 Days	B2 Weeks					
									Print name:	
									Print name:	
									Print name:	
									Print name:	
Students in higher education only	I hereby confirm that the student named above has completed a minimum of 1800 hours) in practice placements as set out above.					Signature of Head of Centre:				

Please attach a continuation sheet if necessary

