



**Academic Information:** List all education beginning with high school.

| Name of Institution | City, State | Dates Attended | Degree Received/Anticipated |
|---------------------|-------------|----------------|-----------------------------|
|                     |             |                |                             |
|                     |             |                |                             |
|                     |             |                |                             |
|                     |             |                |                             |

**Organizations/Community Service Activities:** List all, beginning with high school.

| Name of Organization | Type of Service/Activity | Dates Involved |
|----------------------|--------------------------|----------------|
|                      |                          |                |
|                      |                          |                |
|                      |                          |                |
|                      |                          |                |

**Employment:** List all work experience, both full- and part-time, during the last five years.

| Dates: From To | Position Held | Employer | City, State |
|----------------|---------------|----------|-------------|
|                |               |          |             |
|                |               |          |             |
|                |               |          |             |
|                |               |          |             |

Have you previously applied for admission to the veterinary nursing program?

\_\_\_Yes, \_\_\_No                      Date\_\_\_\_\_



**MURRAY**  
STATE COLLEGE

**From Here... Go Anywhere.**  
**Veterinary Nursing Program**

## Clinical Observation Record

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Name of Applicant: \_\_\_\_\_

Veterinary Hospital Observed: \_\_\_\_\_

Address of Veterinary Hospital: \_\_\_\_\_

The purpose of clinical observation is to acquaint the potential applicant with the nature and scope of the veterinary and veterinary nursing professions and to allow the veterinarian or registered veterinary technician an opportunity to provide feedback regarding the applicant. Upon completion of their observation, the applicant should be able to give a rationale for why they want to become a registered veterinary technician.

**Please consider the following and provide your overall impression: The applicant:**

- arrived promptly for observation and stayed the agreed-upon amount of time.
- were neat & appropriate in their appearance and behavior.
- showed effective listening skills & good verbal communication.
- observed attentively and with interest.
- showed confidence & enthusiasm through their behavior.
- asked questions & gave comments that indicated an attempt to learn about the field of veterinary nursing.

Each applicant must observe 40 hours to be eligible to apply, for which they receive no points. The initial 40 hours of observation can be with either a veterinarian or any member of the veterinary health care team. After the initial 40 hours, the applicant can earn points by observing a registered veterinary technician. Applicants can earn up to an extra 4 points (1 point per 8 hours).

Amount of time observed: \_\_\_\_\_ Date(s) of Observation: \_\_\_\_\_

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Amount of time observed: \_\_\_\_\_ Date(s) of Observation: \_\_\_\_\_

I recommend this student for consideration by the MSC Veterinary Nursing Program: Yes, \_\_\_ No \_\_\_

Comments: \_\_\_\_\_

DVM/RVT Signature: \_\_\_\_\_ DVM \_\_\_ or RVT \_\_\_ Date: \_\_\_\_\_

Print Name of Observer: \_\_\_\_\_

License # \_\_\_\_\_ Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_