



International Credential  
Assessment Service of Canada  
Service canadien d'évaluation de  
documents scolaires internationaux

Current Efficacité  
Accurate Exactitude  
Dependable Fiabilité

[www.icascanada.ca](http://www.icascanada.ca)

## REQUEST FOR ASSESSMENT OF A VETERINARY TECHNOLOGY / ANIMAL HEALTH TECHNOLOGY PROGRAM

### Application Procedures

1. Please complete the ICAS Application Form (including the Document Submission Form, Payment Form and Release of Information Form).
2. Prepare your educational documents. ICAS requires the following:
  - original secondary school diploma
  - original secondary school transcript
  - original graduation diploma / degree certificate for the veterinary technology / animal health technology program
  - original transcript (mark sheets, *indeks*, diploma supplement) for the veterinary technology / animal health technology program
  - clear, complete photocopies of the above documents
  - accurate translations of all documents which were not originally issued in English or French
  - photocopy of a change of name document if the name which appears on your documents differs from the name on your application
  - photocopies of any relevant memberships and licences which you currently hold

**NOTE: If your education was completed in Canada or the United States, you must have official transcripts sent directly to our office by the school (both secondary and postsecondary). Original documents will not be accepted.**

3. Provide payment by credit card, certified cheque, money order or bank draft. Fees are payable in Canadian funds to ICAS of Canada.
4. Mail or courier the application with documents and the required fee to:  
**ICAS of Canada, Ontario AgriCentre, 100 Stone Road West, Suite 102, Guelph ON N1G 5L3**

ICAS will review your application to determine whether you hold standing comparable to secondary school graduation in Canada plus have completed a formal postsecondary program in veterinary / animal health technology at an appropriately recognized / accredited institution. If you have not satisfied these requirements, you will receive a General Assessment Report and will be advised to contact to Ontario Association of Veterinary Technicians (OAVT) or Animal Health Technologists Association of British Columbia (AHTA BC) for information about completing training in your province. A refund of \$250.00 will be issued.

If you satisfy the requirements outlined above, ICAS will then contact the institution you attended to request additional information about the program of study, to determine whether the program is comparable to an approved Canadian program. If the information subsequently received by ICAS is not in English or French, a copy will be forwarded to you so that you can obtain an acceptable translation. When the assessment has been completed, you will receive an Assessment Report. The report will also be sent to OAVT or AHTA BC.

The initial assessment is usually completed within three weeks of receipt of all required documents. Completion of the detailed portion of the assessment is dependent on receipt of the required information from the institution and may, therefore, require more than three weeks.

For assistance, please call (519) 763-7282 or (toll free in Canada) 1 800 321-6021. We can also be reached by e-mail at [info@icascanada.ca](mailto:info@icascanada.ca). For more information, you may visit our Internet site at <http://www.icascanada.ca>

**PLEASE READ THE INFORMATION ON THE PREVIOUS PAGE BEFORE COMPLETING THIS FORM**

Last/Family Name	Given Name(s)
Previous Name(s)	(circle) Male Female Birth Date year month day
Mailing Address	
number and street	apartment number (buzzer code)
city	province / state
country	postal code
Telephone (day) ( )	(evening) ( )
e-mail	
I am applying for an assessment for registration with (Please circle):	Ontario Association of Veterinary Technician Animal Health Technologists Association of BC
Send completed Assessment Report and original documents by:	Mail (no additional fee) Courier (additional charges apply)
List any veterinary technology / animal health technology associations of which you are a member and/or licence(s) which you currently hold	

List all the schools/institutions you attended from primary school to the school/institution in which you are currently enrolled or which you last attended. Use the language and terminology that appear on the document(s) you received.

Dates of Attendance	School Name and Address	Highest Level Completed	Diploma/Certificate Obtained
Primary (Elementary) From: To:			
Secondary From: To:			
Postsecondary Veterinary / Animal Health Technology Program From: To:			
Other Programs From: To:			

The information I have provided is true and accurate. I release the International Credential Assessment Service of Canada from any liability for claims, demands or damages resulting from the use of the assessment by me or by a third party. I understand that if I provide false documents, my application will be cancelled, no refund will be issued, my documents will not be returned and the information will be shared with other agencies and associations.

Date yr \_\_\_\_\_ mo \_\_\_\_\_ day \_\_\_\_\_

Signature \_\_\_\_\_

Print Name \_\_\_\_\_

## DOCUMENT SUBMISSION FORM

Name \_\_\_\_\_

I understand that it is my responsibility to obtain and provide the documents required for preparation of my ICAS Assessment Report. Please note that, at any time during the process, ICAS reserves the right to request official documents forwarded directly to ICAS by the institution or to contact the issuing body for information.

Enclosed are the following original educational documents (please be specific and list all documents that you are submitting

1. \_\_\_\_\_ Original (+ photocopy)
2. \_\_\_\_\_ Original (+ photocopy)
3. \_\_\_\_\_ Original (+ photocopy)
4. \_\_\_\_\_ Original (+ photocopy)
5. \_\_\_\_\_ Original (+ photocopy)

If additional space is required, please attach a separate sheet.

I have contacted my institution to request the following documents to be sent directly to ICAS:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

If additional space is required, please attach a separate sheet.

I, \_\_\_\_\_, am the above applicant  
(print name)

I declare that the information provided on my application for preparation of an ICAS Assessment Report is true and accurate.

I have read, and understand, the procedures for submission of documents

I have read, and agree to, ICAS' Terms and Conditions including the ICAS Privacy Policy

I authorize ICAS to release my Assessment Report to OAVT and / or AHTA BC

Signed: \_\_\_\_\_

Date: \_\_\_\_\_

## INFORMATION FOR PAYMENT

Payment may be by VISA, Master Card, Discover Card or by certified cheque, money order or international bank draft in Canadian funds payable to ICAS of Canada.

Services Requested	Fee
Veterinary Technology / Animal Health Technology Assessment for submission to (select one):	
Ontario Association of Veterinary Technicians (\$350.00)	\$ _____
Animal Health Technologists Association of BC (\$350.00)	\$ _____
Delivery of the report and original documents by:	
Mail (No additional fee, but you must provide signed, written authorization to return your original documents by mail)	
Courier	
Within Canada (\$25); to USA (\$35); other countries (\$85)	\$ _____
<b>TOTAL FEES</b> \$ _____	

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Payment to be made by:     Money order         Bank Draft         Certified Cheque  
    VISA             MasterCard         Discover Card

Credit Card Number                   Expiry Date (mm/yy)     /     CSV:

Cardholder's Name as it Appears on Card (please print)  
\_\_\_\_\_

Address \_\_\_\_\_

Telephone \_\_\_\_\_

Cardholder's Signature \_\_\_\_\_

**\* Note: If the credit cardholder is not the applicant, the cardholder must also complete the information below.**

I, (please print) \_\_\_\_\_, am the credit card holder. I authorize my credit card to be charged the amount indicated above for the purpose of the preparation of an Assessment Report for (applicant's name) \_\_\_\_\_.

I have also read, and agree to, the Terms and Conditions (including the refund policy).

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

## PERMISSION TO RELEASE ACADEMIC RECORD

This is to confirm that I have authorized ICAS International Credential Assessment Service of Canada to obtain my educational record from

Name of Institution \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

for

Degree/Qualification \_\_\_\_\_

Years of Attendance \_\_\_\_\_

Signed \_\_\_\_\_

Name in Full  
(Please print) \_\_\_\_\_

Date \_\_\_\_\_

Please note that a separate form is required for each degree / qualification