



**TEMPORARY PERMIT APPLICATION TO PRACTICE VETERINARY
MEDICINE IN THE STATE OF NORTH DAKOTA - PENDING
EXAMINATION** NDCC 43-29-07.2-3a SFN 51808 (7-19)

A qualified applicant who has graduated from a recognized College or School of Veterinary Medicine, and who has taken and passed the National Board Examination (NBE) and Clinical Competency Test (CCT) or the North American Veterinary Licensing Examination (NAVLE), and for some valid reason has not taken the North Dakota state examination, may obtain a PERMIT to practice veterinary medicine in North Dakota until the next examination is given, if the following conditions are fulfilled:

1. Fill out and return the regular application form with the \$50 application fee.
2. The cost of the permit is \$25.00. Checks should be made payable to the North Dakota Board of Veterinary Medical Examiners and mailed with the completed applications to:

**North Dakota Board of Veterinary Medical Examiners
PO Box 328
Lisbon, ND 58054
Phone: 701-683-4705**

3. Unless you were a North Dakota NAVLE candidate, submit your NBE and CCT or NAVLE scores through the score transfer service operated by the American Association of Veterinary State Boards (AAVSB), www.aavsb.org or 877-698-8482.
4. Provide a copy of your diploma or other official proof of graduation from the College or University attended.

The permit will be issued by the Executive Secretary of the North Dakota Board of Veterinary Medical Examiners. No permit will be granted to an applicant who has previously failed the North Dakota Examination. Please note that this permit does not allow you to do the work of an accredited veterinarian. You need to be licensed to practice and you must complete the orientation program administered by the USDA before you can work as an accredited veterinarian in North Dakota.

**APPLICATION FOR TEMPORARY PERMIT
TO PRACTICE VETERINARY MEDICINE
IN THE STATE OF NORTH DAKOTA**

I hereby make the application for a **PERMIT** to practice veterinary medicine in the State of North Dakota until the Board gives the next examination. I have read the above instructions and have fulfilled the requirements to the best of my ability.

Name

Mailing Address

Date

Practice Address

Date of Graduation

Telephone Number

College or University

Signature