

# APPLICATION FOR TEMPORARY REGISTRATION OF VETERINARIAN DURING DECLARED PUBLIC EMERGENCY

**INSTRUCTIONS:**

- A current photograph (passport size preferred) and/or copy of your current driver's license must be attached.
- Please provide any written communication/letters you have received from Louisiana regarding public health emergency relief efforts.
- **DO NOT LEAVE ANY BLANKS.** Complete each section fully. If a section does not apply to you, indicate "DOES NOT APPLY".
- Use a separate sheet of paper to respond to any questions for which more space is needed.
- **To qualify, you must comply with the following requirements as per Emergency Rule 2010 Deepwater Horizon - ER #1.**

Due to the declaration of a public health emergency by the Governor of Louisiana, the Louisiana Board of Veterinary Medicine (LBVM) has issued **Emergency Rule "2010 Deepwater Horizon – ER #1"** (effective 5/4/2010 through 9/1/2010) providing temporary registration for Out of State Veterinarians who possess specific and express qualifications required by this Emergency Rule. Accordingly:

E. A veterinarian not licensed in Louisiana, but currently licensed, in good standing, in a state jurisdiction of the United States may provide veterinary services needed in response to the oil spill if:

1. the veterinarian has a current permit with the US Fish and Wildlife Service and/or the National Oceanic and Atmospheric Administration, or is operating under a Federal permitted affiliated organization, regarding free-ranging migratory bird rehabilitation, marine mammals, sea turtles, and other unspecified animals, affected by the recent oil spill in Louisiana;
2. the veterinarian has photo identification and a license to verify a current license in a state jurisdiction of the United States;
3. the veterinarian properly registers with the LA Board providing the documentation set forth in 1 and 2 above;
4. the veterinarian is engaged in a legitimate relief effort during the emergency period at sites specified by the LA Department of Wildlife and Fisheries, and/or the LA Department of Agriculture, Office of the State Veterinarian (LA Incident Command Central), and provides satisfactory documentation to the Board that he will be providing veterinary services at such sites specified by these State agencies; and
5. the veterinarian shall comply with the LA Veterinary Practice Act, Board's Rules, and other applicable laws, as well as practice in good faith, and within the reasonable scope of his skills, training, and ability.

F. All out of state veterinarians licensed, in good standing, in other state jurisdictions of the United States shall submit a copy of their respective license, photograph identification, and current permit issued by the US Fish and Wildlife Service and/or National Oceanic and Atmospheric Administration as required by this emergency rule, as well as other requested information, to the LA Board of Veterinary Medicine office for registration with this agency.

**APPLICANT INFORMATION:**

FULL LEGAL NAME: \_\_\_\_\_  
last first middle

CURRENT ADDRESS: \_\_\_\_\_  
street/PO box city state zip

PERMANENT ADDRESS: \_\_\_\_\_  
street/PO box city state zip

CURRENT PHONE: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ PERMANENT PHONE: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_/\_\_\_\_/\_\_\_\_ SOCIAL SECURITY NUMBER: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

PLACE OF BIRTH: \_\_\_\_\_

COLLEGE DEGREE EARNED \_\_\_\_\_  
date institution

1. LIST ALL LICENSES CURRENTLY HELD AS DVM, WHETHER TEMPORARY OR PERMANENT.
- 2.

LICENSE NO.	ISSUING STATE	DATE ISSUED/EXPIRES	If license ever suspended or restricted in any way, explain.
		/	
		/	
		/	

**All Applicants Must Fully Complete the Application Form and Sign Before a Notary.**  
Applicant's current photograph, copy of current DVM license and copy of current permit issued by the US Fish and Wildlife Service and/or National Oceanic and Atmospheric Administration must be attached to this application.

STATE OF \_\_\_\_\_

PARISH / COUNTY OF \_\_\_\_\_

Before me, a Notary Public, duly commissioned and qualified in the above State and Parish/County, personally came and appeared the applicant indicated hereinabove who, after being duly sworn (affirmed), did depose and state "I hereby certify that all information on this application is complete and correct to the best of my knowledge."

\_\_\_\_\_  
 Full, true, and legal signature of applicant

Sworn to and subscribed before me and in testimony hereof I have sworn hereunto set my hand and official seal, at my office in

\_\_\_\_\_  
 this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
 Signature of Notary Public

Applicant's photograph must be attached here.

NOTARY SEAL MUST BE AFFIXED ON APPLICATION.

**Mail signed, fully completed (no blanks), notarized application to:**  
 LOUISIANA BOARD OF VETERINARY MEDICINE  
 263 Third Street, Suite 104,  
 Baton Rouge, Louisiana 70801