

ANIMAL HEALTH TRUST

GENERAL ROTATING INTERNSHIP APPLICATION FORM

Please answer all questions as fully as possible:

| Personal information | | | |
|-----------------------------|--|--------------|--|
| Surname | | | |
| Forename | | Title | |
| Address | | | |
| Postcode | | | |
| Telephone | | | |
| Email | | | |

| Education and Training | | | |
|--|-----------|--|--|
| Dates | | Veterinary Degree and Grades | |
| From | To | | |
| | | | |
| From | To | Postgraduate qualifications (this is not essential) | |
| | | | |
| Are you eligible for membership of the RCVS? Yes/No | | | |
| Are you an EEA citizen? Do you have the right to live/work in the UK? Yes/No | | | |
| If English is not your first language, do you have an IELTS qualification and if so what level has been attained? | | | |

Present or more recent Employment

| | | | |
|-----------------------|--|--------------------------------------|--|
| Company name | | Position Held | |
| Present Salary | | Start date on this employment | |

Responsibilities and duties performed

| |
|--|
| |
|--|

Previous employment if any

| From | To | Name and address of Previous employments | Position Held and responsibilities |
|------|----|--|------------------------------------|
| | | | |

Please give details of two employment referees, one of whom should be ideally your present or most recent employer. One of these referees should provide a brief letter in support of your application, signed and on headed paper. Please attach this letter with your application.

| | | |
|--------------------|--|--------------|
| Reference 1 | | |
| Name | | Title |
| Address | | |
| Postcode | | |
| Phone | | |
| Email | | |
| Reference 2 | | |
| Name | | Title |
| Address | | |
| Postcode | | |
| Phone | | |
| Email | | |

Please use the space provided below in support of your application, detailing how you fulfil the requirements for this position. Maximum 500 words

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How did you hear about our programme?(AHT Website, Vet Times etc)

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Declaration

I certify that all the information I have given on this form is true and correct to the best of my knowledge. Any false statement may be sufficient cause for rejection or, if employed, may result in the termination of employment.

| | | | |
|------------------|--|-------------|--|
| Signature | | Date | |
|------------------|--|-------------|--|