



Veterinary Technology Program
Edison State Community College
1973 Edison Drive
Piqua, OH 45356
937.778.8600

Shadowing Requirement Documentation

This document is to confirm that _____ (print student name) has completed at least 30 hours of shadowing experience with a registered veterinary technician (RVT, LVT, CVT) who is practicing under the supervision of a veterinarian (DVM/VMD). This experience can be paid or unpaid and must have taken place within one year of submitting an application to the Veterinary Technology Program at Edison State Community College.

Student to complete:

Please describe your (student's) experience in a few sentences, including some procedures that were witnessed. If this was a paid position, please note what position you held and how long you held the position.

Four horizontal lines for student description.

- Checkboxes for: Please use the back if more space is required; Hours waived with submission of transcripts; I certify that the listed experience and information below is correct to the best of my knowledge.

(student signature) (date)

RVT Supervisor to complete:

List start date and end date for shadowing hours for this experience: _____/_____

Estimate number of shadowing hours completed during this time (30 hrs minimum) _____

Primary DVM's Name (printed) _____

Veterinary Facility Name, Address, Phone number, and Email, if applicable.

P: _____
E: _____

RVT Name (printed) _____ Signature _____ Date _____