

**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	
State Community College.	
Student to complete:	
	a few sentences, including some procedures that were
witnessed. If this was a paid position, please n	ote what position you held and how long you held the position.
	ed. Mark this box to indicate you continued your description on
the back of the document.	
	ts showing one-year enrollment in a Veterinary Science Program
•	Vet Tech Program Director will sign as RVT Supervisor to
acknowledge receipt of transcripts).	on listed below are correct to the best of my knowledge.
Teertify that the experience and information	on listed below are correct to the best of my knowledge.
(student signature)	(date)
RVT Supervisor to complete:	
List start date and end date for shadowing hou	rs for this experience:/
Estimate number of shadowing hours complet	ed during this time (30 hrs minimum)
RVT's Name and License Number	RVT
Veterinary Facility Name, Address, Phone num	ber, and Email, if applicable.
	P:
	E:
RVT's Signature	Date
- 3.0	