



## KENTUCKY BOARD OF VETERINARY EXAMINERS

4047 Iron Works Parkway, Suite 104, Lexington, KY 40511

Office: 502-564-5433 • Fax: 502-695-5887

[kbve.ky.gov](http://kbve.ky.gov) • [vet@ky.gov](mailto:vet@ky.gov)

### Application for a Special Permit

**OFFICIAL USE ONLY**

**Instructions:** This application must be completed by the individual seeking to obtain a Special Permit under KRS 321.201, while waiting to retake the North American Veterinary Licensing Examination (NAVLE) or the final stage of the AVMA Educational Commission for Foreign Veterinary Graduates (ECFVG) or AAVSB Program for the Assessment of Veterinary Education Equivalence (PAVE). Completion of all fields on this application are mandatory. Insufficient answers or omissions will be sufficient grounds for rejection of this application. **Use the check list at the end of the application to ensure your submission is complete. Print SINGLE SIDED; DO NOT staple.**

I. Contact Information					
First Name	Middle Name	Last Name			
Other Names Used, if any <small>(e.g., maiden name, nick name, etc.)</small>	Date(s) of Use for Other Names	Social Security Number <small>(required if U.S. Citizen)</small>			
		Date of Birth <small>(required)</small>			
Personal Email Address					
Personal Address Type	Street	City	ST	Zip	Country
Mailing Address					
Permanent Address					
Cell Phone					
Employer Business Name					
Business Address					
Business Phone					

### II. Background Information

1. Complete the table below detailing all previous NAVLE attempts:

	First Attempt	Second Attempt	Third Attempt	Fourth Attempt
Date (MM/DD/YYYY)				
State / Jurisdiction				
Score				

Submit Complete Application to:  
 Kentucky Board of Veterinary Examiners  
 4047 Iron Works Parkway, Suite 104  
 Lexington, Kentucky 40511



2. Indicate window (Month / Year) of next NAVLE attempt, if applicable:

\_\_\_\_\_  N/A

3. Indicate window (Month / Year) of next ECFVG or PAVE attempt, if applicable:

\_\_\_\_\_  N/A If yes, indicate portion(s) of exam for retake: \_\_\_\_\_

4. Since your last application, have you been convicted of a felony or misdemeanor other than a minor traffic violation?  Yes  No If yes, provide a brief explanation below and attach copies of records.

\_\_\_\_\_

**III. Application Check List**

**Disciplinary records.** If applicable, any and all records of actions or circumstances listed in Question 4. If no disciplinary records to disclose, check the box:  N/A

**Special Permit.** A letter from the Kentucky licensed supervising veterinarian, on letterhead from the employing clinic, is required, including the following. For a template letter, visit <https://kbve.ky.gov/forms-verification/Pages/default.aspx> and open the heading "Veterinarian Applications".

**Fee payment – REQUIRED – \$200 Special Permit Fee.** Fee is pursuant to [201 KAR 16:510](#). Payments should be made payable to the **Kentucky State Treasurer**. Checks may be personal, business, cashier's check, money order, bank draft, etc., in U.S. dollars; separate checks are not required. **DO NOT SEND CASH.**

A Special Permit allows the credential holder to work as a veterinarian under the direct supervision of a Kentucky licensed veterinarian. Note that a **special permit expires seven (7) business days after scores are released**, pursuant to [KRS 321.201](#). Permit holders should contact KBVE at [Vet@ky.gov](mailto:Vet@ky.gov) immediately following receipt of their score to determine next steps toward licensure.

**I hereby state that the information contained herein is true and accurate to the best of my knowledge, and that should the Kentucky Board of Veterinary Examiners determine that any statement herein is false, I acknowledge the Board may suspend, revoke, or terminate any special permit issued by the Board.**

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

