Reference letter for recertification of ECVSMR Diplomates

For quality assurance purposes, reference letters are a necessary part of the re-certification process in order to have third parties attest to a Diplomate’s good standing within the profession, and his or her continued activity in the speciality. This is an EBVS requirement for those wishing to remain on the EBVS list of Specialists.

**Name of person supplying reference:** click to type

**Name of diplomate applying for recertification:** click to type

**Year of application for recertification:** click to type

**In what position do you know the applicant?**

*One referee should be an ECVSMR Diplomate from the same country. If there are no professionally qualified persons in the applicant's country or speciality, specialists in other disciplines or a senior colleague (e.g. Head of Department, Dean) may act as a referee. Only one academic colleague at the same institute may provide a reference.*

1. Colleague from the same country
2. Colleague from a different country  If yes: which country?
3. Diplomate from a different discipline  If yes: which speciality?
4. Senior colleague (head of department, dean,…)  If yes: which position do you have?

**Over what period of time can you assess the applicant's work?**

*A referee must normally have known the applicant for the five-year period prior to application/re-application that the applicant is offering as experience in their speciality.*

Give the number years

**In your opinion, which of the following criteria necessary for re-certification does the applicant meet?** (Multiple answers are possible)

|  |  |
| --- | --- |
| He/she has been practising (through practice, teaching and/or research) his/her speciality for at least 60% of the time (24 hours per week), for the last 5 years |  |
| He/she demonstrates satisfactory moral and ethical standing in the profession |  |
| He/she practices scientific, evidence-based veterinary medicine, which complies with animal welfare legislation |  |
| He/she promotes continuous improvement in the quality and standard of specialist practice |  |
| He/she communicates effectively to the public and to professional colleagues |  |

**Justification**

|  |  |
| --- | --- |
| I confirm that I am not a relative or partner of the applicant |  |
| I confirm that my reference is professional |  |
| I confirm that I have read the applicant’s application form |  |
| I signify below my whole-hearted support for this application |  |

Signature:

Name (in capital letters):

Date: