

## Provision of Services Form for UK Practising Vets

This form should be completed by European veterinary surgeons registered at the RCVS with a 'UK Practising' membership who wants to provide veterinary services in other EU member states (outside the UK) in accordance with Directive 2005/36/EC on the recognition of professional qualifications.

**Please submit this form and payment 14 working days before the date you intend to provide services, or or as soon as possible, to allow us enough time to process your request.**

**We will acknowledge your application within 3 working days.**

**You will be issued with a copy of the Provision of Services Certificate(s) together with confirmation that it has been sent within 10 working days of the RCVS receiving this form and the correct payment.**

**Please complete all sections of the form.**

**Member's details** (for security purposes please ensure the personal details you give us match with what we currently hold on your record).

<b>Title</b>	.....
<b>All Surnames:</b>	.....
<b>All Forenames:</b>	.....
<b>Register number:</b>	.....
<b>Register Address (usually your work address):</b>	..... ..... .....
<b>Email:</b>	.....
<b>Contact number:</b>	.....
<b>Date of Birth:</b>	Day ..... / Month ..... / Year .....

**Details of the Competent Authority** (This is where your Provision of Services Certificate will be sent. If you want the RCVS to send more than three Provision of Services Certificates, please continue on a separate piece of paper. Please note it costs £12.00 for every Provision of Services Certificate sent).

<b>Name of Competent Authority</b>	
<b>Address of Competent Authority</b>	
<b>Fax number</b>	
<b>Email address</b>	

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**Details of services being provided**

**You intend to provide services:**

From: Day            Month            Year  
 .....

To: Day            Month            Year  
 .....

**Throughout this period you will be working the following days or periods:**

.....  
 .....  
 .....

Please tell us where you would like your copy of the Provision of Services Certificate sent by ticking the relevant box (please only tick one box).

Work address  Home address  Alternative address  (Please provide address below)

Alternative address	<i>This will not be added to your RCVS record</i>		
	Postcode		Country

### Select payment method

- I enclose a cheque for **£12.00**
- I will pay **£12.00** via bank transfer

I'm very sorry but we are unable to accept a card payment for this transaction.

### Paying by bank transfer

 (Please include your Register number as a reference)

Bank name: Lloyds Plc

Bank account name: Royal College of Veterinary Surgeons-Fees a/c

Bank account no: 01066656 Bank sort code: 309897

**International transfers** Please note, all international bank charges incur a bank fee, this fee amount will need to be added to your fee.

IBAN: GB93LOYD30989701066656

BIC: LOYDGB21031

SWIFT number: LOYDGB2L

**Paying by Cheque** Please make cheques payable to the 'Royal College of Veterinary Surgeons' and note your Register number and full name on the reverse of the cheque.

### Contact details

Registration Department

Royal College of Veterinary Surgeons

Belgravia House

62-64 Horseferry Road

London

SW1P 2AF

**Telephone:** 020 7202 0707

**Fax:** 020 7222 2004

**Email:** [registration@rcvs.org.uk](mailto:registration@rcvs.org.uk)