**APPLICATION**

**2024 Victorian Animal Disease Investigation Course**

* **Please complete all sections of the application form.**
* **Places are limited to 12 participants per course and places are allocated as applications are received.**
* **Successful and unsuccessful applicants will be notified shortly after the application closing date.**
* **Unsuccessful applicants will be placed on a waiting list and will be notified if a position becomes available or given first opportunity for future training courses.**

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| Applicant Details | | | |
| **Applicant name:** | | | |
| **Practice name:** | | | |
| **Practice address:** | | | **Post code:** |
| **Phone (office):** | | **Mobile:** | |
| **Email address:** | | | |
| **Veterinary registration (state and number):** | | | |
| Course Date Preference Checked box means that you are available on this date. You may check more than one course date to indicate that you are available. Please indicate you date preference (eg 1-4) for each course you are available for. | | | |
| **Ellinbank: Tues 27 – Wed 28 February 2024** | **Preference** | | |
| **Rutherglen: Tues 5 – Wed 6 March 2024** | **Preference** | | |
| **Bendigo/Elmore: Tues 12 – Wed 13 March 2024** | **Preference** | | |
| **Hamilton: Tues 26 – Wed 27 March 2024** | **Preference** | | |
| Accommodation and Dietary Requirements The Department offers accommodation to participants that require it. Due to accommodation pressures, note that rooms may have to be shared with other participants. Please select if you require accommodation the night before training starts and/or the night of the first training day. Please also advise of any special dietary requirements that you may have. | | | |
| **I require accommodation the night prior to Day 1 of the training course:** | | | |
| **I require accommodation the night of Day 1 of the training course:** | | | |
| **I require accommodation the night of Day 2 of the training course:** | | | |
| **Special Dietary Requirements:** | | | |
| **Gloves**  Gloves are supplied for day 2 of training. Please advise what size gloves you wear. | | | |
| **Small**  **Medium**  **Large**  **X-Large** | | | |
| Applications must be submitted by email to [adi@deeca.vic.gov.au](mailto:adi@deeca.vic.gov.au) by COB Friday 16 February 2024. Further information contact us at **adi@deeca.vic.gov.au** | | | |