



NAVLE
Retake Policy
Appeal Form

The only exception to the eligibility requirements will be at the explicit request through a United States or Canadian licensing/registration authority. ICVA will accept an appeal to the policy for a maximum of ONE additional attempt that includes an attestation of eligibility from a licensing/registration board on behalf of a candidate who is seeking licensure/registration in that jurisdiction.

[illegible]

Reason for Appeal (attach additional documentation, if necessary):

Candidate Attestation:

I certify that the information provided on this form is true, accurate, and complete. I acknowledge that ICVA may verify the information included on this form and I understand that if I provide any false information, the jurisdiction may be notified, my appeal may be denied and I may be referred to the committee on irregular behavior.

Name: _____

Signature: _____ Date: _____

CANDIDATES APPEALING THE RETAKE POLICY – Contact the jurisdiction where you intend to seek licensure/registration to inquire as to the correct person to complete the attestation below.

JURISDICTION SECTION (To be completed by Administrator or Board Chair)	
Have you had any previous interactions with this candidate?	
Do you have any evidence that the candidate intends to practice in your jurisdiction?	
Does your jurisdiction have a remediation requirement after a specified number of attempts?	
Jurisdiction Position on ICVA's Retake Policy	
<input type="checkbox"/>	Jurisdiction has adopted ICVA's retake policy
<input type="checkbox"/>	Jurisdiction law requires an additional attempt be granted
	Citation:
<input type="checkbox"/>	Jurisdiction does not have a law related to attempts, but will permit an additional attempt
<input type="checkbox"/>	Jurisdiction has adopted a different retake policy or law (Describe and include citation, if applicable):

Licensing Authority/National Examining Board Attestation:

I have reviewed the individual's prior examination history. The candidate would be eligible for licensure/registration in this jurisdiction if they passed the NAVLE after more than five attempts and go on to meet all other licensure/registration requirements. I certify that I am authorized to provide this attestation on behalf of the veterinary licensing /registration authority.

Name: _____ Signature: _____

Title: _____ Date: _____

Jurisdiction: _____

JURISDICTIONS - PLEASE EMAIL THIS FORM TO appeals@icva.net at least 30 days prior to the close of the application window.

- Appeals to ICVA will be reviewed within 30 days of submission.
- The candidate will then have 1 year from the date of the decision to apply to retake the NAVLE.
- Successful appeals will result in one additional attempt to pass the NAVLE.