

NAVLE Retake Policy Appeal Form

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

CANDIDATE SECTION (Candidate must complete and send to JURISDICTION for attempt limit appeals)			
Candidate Name:			
If you have previously taken NAVLE under another name, enter that name here:			
ICVAID:		Date of Birth (MM/DD/YY):	
Veterinary School Name:		Graduation Year:	
Jurisdiction in which you are seeking licensure/registration:			
Dates and Scores for Previous NAVLE Attempts (attach additional documentation if necessary):	Date	Score	
Reason for appeal (attach additional documentation, if necessary):			



Candidate Attestation:

The information I have provided above is accurate and I meet all the licensure/registration requirements for the jurisdiction in which I am seeking licensure/registration.

Name: _____

Signature: _____ Date: _____

CANDIDATES APPEALING THE RETAKE POLICY – Contact the jurisdiction where you are seeking licensure/registration to inquire as to the correct person to process an appeal on your behalf.

LICENSING AUTHORITY SECTION (To be completed by Administrator or Board Chair)	
Background Information	
When did this candidate first seek licensure/registration in your jurisdiction?	
What evidence do you have that the candidate intends to practice in your jurisdiction?	
Has the jurisdiction imposed a remediation requirement for this candidate? If so, please describe.	
Reason for Requesting Appeal	
<input type="checkbox"/>	State/Provincial/Territorial law requires an additional attempt be granted
	Citation: _____
<input type="checkbox"/>	Other
	Rationale: _____

Licensing Authority/National Examining Board Attestation:

I have reviewed the individual’s prior examination history. They are eligible to sit for the exam and 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 present this request on behalf of the veterinary licensing authority.

Name: _____ Signature: _____

Title: _____ Date: _____

JURISDICTIONS - PLEASE EMAIL THIS FORM TO appeals@icva.net by June 30, 2024, for appeals to the policy for the November-December 2024 testing 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.