

## NAVLE Test Administration Appeal Form

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

<b>CANDIDATE SECTION (Candidate must complete and send to JURISDICTION for attempt limit appeals)</b>	
Candidate Name:	
ICVAID:	
Date of Birth:	
Veterinary School Name:	
Veterinary School Graduation Year:	
Jurisdiction in which you are seeking licensure:	
Policy Being Appealed	<input type="checkbox"/> <i>test administration – A candidate experienced significant test administration issues that affected their ability to successfully complete the NAVLE.</i>
Reason for appeal (attach additional documentation):	

**Candidate Attestation:**

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

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

CANDIDATES APPEALING THE RETAKE POLICY – CONTACT THE JURISDICTION IN WHICH YOU ARE SEEKING LICENSURE TO INQUIRE AS TO THE CORRECT CONTACT PERSON TO PROCESS AN APPEAL ON YOUR BEHALF.

<b>LICENSING AUTHORITY SECTION</b> (To be completed by Administrator or Board Chair)	
<b>Background information</b>	
When did this candidate first seek licensure 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? At what point in the process was remediation required?	
<b>Reason for Requesting Appeal</b>	
<input type="checkbox"/>	State/Provincial law requires an additional attempt be granted
	Citation: _____
<input type="checkbox"/>	Other
	Rationale: _____

**Licensing Authority Attestation:**

I have reviewed the individual’s prior examination history. They are eligible to sit for the exam and meets all licensure requirements and will be eligible for licensure in this jurisdiction if they pass the NAVLE. 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](mailto:appeals@icva.net)

- 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 a maximum of one additional attempt to pass the NAVLE.