

WREXHAM

Daleside Veterinary Group, Main Road, Rhosrobin Wrexham, LL11 4RL Large Animal 01978 311 444

Small Animal 01978 311 881 Email hello@dalesidevets.co.uk

Fax 01978 311 555

SHOTTON

Daleside Veterinary Group, 97 Chester Rd East, Shotton, Deeside, Flintshire, CH5 1QB

Small Animal 01244 830 065 Email hello@dalesidevets.co.uk

Fax **01244** 814 488

Application for Clinical EMS

Name:			
Universit	Jniversity:		
Year of S	study:		
Please st	ate the dates you would like placement for:		
1. Wł	nat area of veterinary medicine do you intend to work in?		
2. Wh	nat interests you about Farm Animal Practice?		
3. Why	y do you want to see practice with Daleside Veterinary Group?		









4. Are you able to provide your own accommodation, if so where?	
5. Do you ha	ave your own car or a mode of transportation?
6. Are you v	willing to attend calls out-of-hours?
	escribe in 60 words what you hope to gain from seeing practice with Dalesid Group in North Wales?
Please attach experience, ar	a written reference from a farm where you have worked or gained nd a previous veterinary placements you have already completed.
Address:	
Signature	Date

