College of Veterinarians of British Columbia

Candidate Biography

Candidates are invited to provide biographies to be circulated with the Nomination Committee's Declared Slate of Candidates to the registrant body during the Council Election. The following form has been developed for the purpose of gathering candidate biographical information in a uniform context for ease of review and comparison by registrant voters, but it is the choice of the individual candidate whether or not they complete the included questionnaire in its entirety or in part, and whether or not they prefer to provide a separate submission. Each candidate's form (however it is filled out) and any additional submissions will be included in the voting materials circulated to all eligible registrant voters for their consideration.

Candidate Name: _____

QUESTIONNAIRE

1. Are you, or have you ever been, a Practice Owner?

   ☐ Yes – currently
   ☐ Yes – previously
   ☐ No

2. What year did you graduate with your veterinary degree?

   _____

3. In what geographical area of BC do/did you **practice?** (check all that apply)

   ☐ Northeast
   ☐ Nechako
   ☐ North Coast
   ☐ Cariboo
   ☐ Kootenay
   ☐ Thompson-Okanagan
   ☐ Mainland/Southwest
   ☐ Vancouver Island/Coast

4. In what geographical area of BC do you **currently live**?

   ☐ Northeast
   ☐ Nechako
   ☐ North Coast
   ☐ Cariboo
   ☐ Kootenay
   ☐ Thompson-Okanagan
   ☐ Mainland/Southwest
   ☐ Vancouver Island/Coast
   ☐ Other (please describe): _____

6. What is/was your **field of practice** (check all that apply)?

- ☐ Large/food animal
- ☐ Small animal
- ☐ Exotic animals
- ☐ Mixed
- ☐ Laboratory animal
- ☐ Equine
- ☐ Academia
- ☐ Government
- ☐ NGO
- ☐ Industry
- ☐ Zoo/Wildlife
- ☐ Shelter
- ☐ Other (Describe): _____

7. Do you hold any specialty board certifications or graduate degrees?

- ◯ Yes (Describe):
- ◯ No

8. Do you have past or current experience as a member of any of the following CVBC Committees or council? (check all that apply)

- ☐ Council
- ☐ Discipline Committee
- ☐ Investigation Committee
- ☐ Registration Committee
- ☐ Practice Facility Accreditation Committee
- ☐ Continuing Competence Committee
- ☐ Other (Describe): _____

9. What areas of expertise or interest do you have that might be helpful in your work with the CVBC?

10. Any additional information you would like to provide? (You may include a “candidate statement” here if you wish)