



The
GEORGE
Veterinary Group

EMS APPLICATION FORM

Name:

University:

Course Year:

Home Address:

Email:

Contact number:

Which department are you interested in seeing practice with?

What are your preferred dates?

Have you previously seen placement at the George, and if so with which department?

What are your main objectives from a placement with us?

We offer accommodation for those who may need it. Please ask about availability and cost once a place has been offered.

Please return to the appropriate department with which you are requesting to see practice