The Veterinary Technician profession involves health risks. The following "Warning of Hazards and Risks" describes potential dangers during training and helps students make an informed decision about participation in the BTC Veterinary Technician Program. Each student will read the "Warning" statements below and sign the "Informed Acknowledgment and Consent to Hazards and Risks" (next page) before entry into the Veterinary Technician (VT) Program.

**WARNING OF HAZARDS AND RISKS**

The purpose of the WARNING is to aid you in making an informed decision as to whether you (or your child or ward) should participate in the VT Program at BTC, and accordingly, whether you should sign the "Informed Acknowledgment and Consent to Hazards and Risks" on the following page.

Participation in the practice of animal health and veterinary technician education may involve injury, illness, or death to one’s self or others. Such injury or illness can include, but is not limited to, biting, kicking, scratching, and other actions of animals, exposure to infectious disease, improper use of equipment or substances involved in the practice of animal health care, exposure to hazardous substances or radiation. Accidental injury may also occur in the clinical setting, or enroute to or from a clinical site. Any injury or illness can affect one's personal health or the health of an unborn child. An injury or illness can impair one's general physical and/or mental health and may impact one's future ability to earn a living, engage in other business, social, or recreational activities.

In addition to acknowledging hazards and risks, the applicant must be aware of personal responsibility regarding matters of safety involving self, animals, and others. He/she is to ask questions and learn as much as possible from faculty, staff, facility/agency veterinary technicians and/or other knowledgeable persons. Students must inform appropriate faculty of any personal relevant medical condition that might potentially pose hazards or risks to self or others. A student may be required to submit permission from his/her personal physician to participate in veterinary technician education activities.

The VT Program does not discriminate on the basis of age, marital status, sex, race, color, creed, or national origin or the presence of any physical or sensory handicap, disabled or Vietnam Era veteran status.

Veterinary Technicians must be capable of communicating with other persons and maneuvering animals and heavy equipment. Therefore, they must have adequate use of limbs and speech. They must also have the ability to remain mentally and physically alert to react to emergency situations, equipment malfunctions, and safety hazard warning techniques. Therefore, they must have the functioning ability to feel, see, hear, and smell. Every reasonable attempt will be made to accommodate disabilities. Persons who consider themselves to be disabled and/or in need of accommodations should contact the program coordinator at the earliest possible date.
I want to participate in the Veterinary Technician Program at Bellingham Technical College. I have read the preceding WARNING OF HAZARDS AND RISKS and I understand that Veterinary Technician training includes activities involving the RISK OF INJURY, ILLNESS, PARALYSIS, OR DEATH. I also understand that by participating in the BTC Veterinary Technician Program, I am subject to the possibility of injury, illness, paralysis, or death as outlined previously in the description of warnings. By signing this Informed Acknowledgment and Consent to Hazards and Risks, I acknowledge that:

1. I have read and understand the content and agree to the terms listed in the WARNING.
2. I have had a chance to ask questions and seek advice.
3. I have informed the Veterinary Technician department of any physical or emotional conditions which might pose risk to myself or others. If my physical or emotional status should change during the course of my Veterinary Technician education which might possibly affect my safety or the safety of others, I will inform appropriate faculty.
4. I am 18 years of age or over, or if not, my legal guardian(s) also acknowledges these hazards and risks on my behalf.
5. I voluntarily choose to participate in the Veterinary Technology Program at Bellingham Technical College.

________________________  _____________________________
Participants Printed Name  Participants Signature

________________________  _____________________________
Date  Participants Date of Birth

________________________
Student ID Number (SID)

________________________
Signature of Participant’s Legal Guardian (if under 18 years of age)

College Use Only:

________________________  _____________________________
Date Received  Staff Signature

MUST BE COMPLETED PRIOR TO ENROLLMENT