



Equine Dental Providers of America

2305 S. Day Street Brenham, Texas 77833 www.EDPAonline.org

Return to address above or email: ExecSec@EDPAonline.org

Pre-Certification Evaluation Application

Date: _____

1. Applicant Information:

Name: _____ EDPA Member # _____

Date of Birth: _____ Address: _____

City: _____ State: _____ ZIP: _____

Phone: _____ Cell: _____

Email: _____ Website: _____

2. Education:

High School/GED: _____ Yr Completed: _____

College/University: _____ Yr Completed: _____

Graduate: _____ Yr Completed: _____

EDP Practice: _____ Yr Started: _____

Practice Location: Local Regional National International

Average Number of Horses Seen per Year: _____

Provide one of the following:

a. A "Certificate of Completion" in fields of equine/animal education.
* This can include under graduate or graduate school, technical school, continuing education courses, or other equine dentistry courses.

b. Apprenticeship.

*Applicant must complete an apprenticeship under supervision of a veterinarian or certified equine dental provider. Applicant must provide the EDPA Apprentice Evaluation form signed by referenced supervisor.

3. Case Studies:

* Applicant must provide a 10 or more case studies of varied degree of difficulty and stages of age in which they have provided care. Case studies must include the following:

1. Before pictures of left, right, front- closed and left, right, front open as well as interior.
2. Dental chart detailed with evaluation of condition.
3. Detailed and explicit course of maintenance.
4. After pictures of left, right, front- closed and left, right, front open as well as interior.

*** Applicant must have ALL Case Charts signed by the attending or supervising veterinarian.**

4. References:

Applicant must have references and letters of recommendations from two (2) horse owners as well as two (2) veterinarians.

Applicant must have this application, all necessary documentation, case studies and appropriate fee to the EDPA. The EDPA has 30 days to review the application and respond with approval or denial with recommendations to the applicant.

Once the applicant has received EDPA Pre-Certification Evaluation Approval, the applicant may then apply for the Annual EDPA Certification Test. See the EDPA Certification Test Guidelines for more details.

Applicant Signature: _____ **Date:** _____

*EDPA Member Pre-Certification Evaluation Fee: \$50.00

* Non – EDPA Member Pre-Certification Evaluation Fee: \$100.00

For Office Use Only

Committee Approved: _____

Approved Date: _____

More information needed:

EDPA Certification Guidelines Mailed: _____

