

IMPORTANT INFORMATION FOR VETERINARY ASSISTANT STUDENTS

All students in the Veterinary Assistant program must provide proof of pre-exposure to rabies vaccination within 4 weeks of beginning the program (**deadline: February 1, 2019**).

Immunization may be obtained prior to admission at the student's expense - consult your physician for details. If you have drug coverage through work, parents or spouse, check with your plan's administrator for coverage details as certain types of vaccinations may not be covered. If your plan does not cover these injections, the Student Insurance Plan will cover 80% of the cost if the immunization series is obtained **after** the first day of classes in January. The series of three injections is **\$710**. Students must make the initial payment and are reimbursed by the insurance carrier. If students wish to participate in the Student Insurance Plan, they may not opt out of the plan.

Immunization clinics will be set up for the students' convenience at the Orillia campus. **Payment (\$710)** must be made online prior to the clinic. Please complete the brief immunization questionnaire below and return it as soon as possible so that we can arrange the clinics.

Important: Deadline to submit questionnaire is December 21, 2019.

For more information about the immunization requirement, please contact Sue MacNeal at (705) 325-2740, ext. 3391 or Amy Lagacy at (705) 325-2740, ext. 3074. For additional information on the Veterinary Assistant program, visit the College's Web site at www.georgiancollege.ca and follow the program links.

VETERINARY ASSISTANT IMMUNIZATION QUESTIONNAIRE

Please return no later than December 21, 2019 to:

Email to amy.lagacy@georgiancollege.ca or FAX at 705-329-3110

Yes, I would like to attend the immunization clinics at the Orillia campus as part of my program. I understand that this is at my own expense and that I may obtain reimbursement through the Student Insurance Plan. Payment is due online (**\$710**) **please watch for a web link for online payment to be emailed to you.**

No payment – no immunization – no exceptions

No, I will arrange for immunization prior to the first week of February and will provide proof of active immunization through a vaccination certificate. Consult your physician for details.

Name: _____

Student #: _____

Phone: _____
(daytime) (evening)

Email: _____

Signature: _____

Date: _____