



**Florida
Animal
Control
Association**

Florida Animal Control Association
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Euthanasia Certification Instructor Application

GENERAL REQUIREMENTS

1. Must be certified in Euthanasia by FACA or must be a Florida State Licensed Veterinarian.
2. Must be employed by a FACA Member Agency or Associate Organization, *unless applicant is a Florida State Licensed Veterinarian who is contracted with a FACA Member Agency or Organization.*
3. Must demonstrate extensive Euthanasia experience and adequate teaching abilities.
4. Must make every effort to attend FACA's Annual Instructor Meeting.
5. Must agree to adhere to the methods and philosophies of Euthanasia outlined in Florida State Statute 828.058, the Euthanasia Certification manual provided by FACA, the FACA Policy Statements pertaining to Euthanasia, and the Instructor Guidelines.
6. Must stay current with information pertaining to Euthanasia as it becomes available by reading published articles, panel reports, attending seminars or additional training opportunities, etc.
7. Must complete and submit the below Applicant Questionnaire, signed by both the applicant and the head of the FACA Member Agency or Organization.

APPLICANT INFORMATION

NAME: _____

EMAIL: _____

PHONE: _____

COUNTY: _____

AGENCY: _____

AGENCY HEAD: _____

Applicant Questionnaire

** Use additional paper if necessary*

- 1) Are you a Florida State Licensed Veterinarian? YES / NO
 - If yes, License Number: _____

- 2) Are you Certified by FACA to perform Euthanasia? YES / NO
 - *Not required for licensed veterinarians*
 - If yes, date of FACA certification: _____

- 3) Are you a Certified Veterinary Technician? YES / NO
 - If yes, by what authority: _____

- 4) On average, how many euthanasia's do you perform per month? _____

- 5) Over the past 2 years, approximately how many euthanasia's have you performed in total? _____

- 6) Please list the species that you have experience in euthanizing: _____

- 7) Please describe your experience in administering **sedation**, to include all methods, techniques or equipment that you have experience with:

8) Please describe your experience in administering *euthanasia*, to specifically include all methods, techniques or equipment that you have experience with:

9) Please detail your experience in handling fractious and/or injured animals for the purposes of euthanasia:

10) Please detail your experience in teaching and/or presenting other courses or classes:

11) Please describe any additional professional qualifications and/or work experience that you have, that will benefit your ability to be a quality Euthanasia Instructor:

12) Please explain why you would like to be a FACA Euthanasia Instructor: _____

APPLICANT: I hereby apply to be a FACA Certified Euthanasia Instructor in accordance with the above criteria. In doing so, I agree to adhere to the methods and philosophies of Euthanasia outlined in Florida State Statute 828.058, the Euthanasia Certification manual provided by FACA, the FACA Policy Statements pertaining to Euthanasia and the FACA Instructor Guidelines.

SIGNED: _____ **DATE:** _____

CURRENT JOB TITLE: _____

AGENCY HEAD (or designee): I hereby attest to the accuracy of the information documented above and feel that this applicant has the expertise, as well as the teaching ability, required to be a quality extension of the Florida Animal Control Association.

SIGNED: _____ **DATE:** _____

PRINT NAME: _____ **PH#:** _____

TITLE: _____