

# Work Experience Log

	Date	Total Hours	Type of Premises	Name of Premises	Supervisor	Animal	Summary of Experience
Example 1	7 <sup>th</sup> - 11 <sup>th</sup> July 2024	31	Small animal veterinary practice	Country Vets Ltd.	Joe Bloggs	Small animal	<ul style="list-style-type: none"> <li>Observed veterinary consults and surgeries</li> <li>Assisted administration and nursing staff</li> </ul>
Example 2	14 <sup>th</sup> - 18 <sup>th</sup> April 2025	36	Sheep Farm	Farmer Mary Bloggs	Mary Bloggs	Large Animal	<ul style="list-style-type: none"> <li>Prepared sheds for lambing</li> <li>Bottle feed lambs</li> </ul>
Example 3	21st-25th October 2024	10	Mixed veterinary practice	Meadowview Vets	Dr. Alan Hughes	Small animal	<ul style="list-style-type: none"> <li>Shadowed companion animal consultations.</li> <li>Assisted with cleaning and equipment preparation.</li> </ul>
Example 4	21st-25th October 2024	10	Mixed veterinary practice	Meadowview Vets	Dr. Alan Hughes	Large animal	<ul style="list-style-type: none"> <li>Shadowed calls with farm animals</li> <li>Observed vet treat a displaced abomasum</li> </ul>

# Work Experience Log

	Date	Total Hours	Type of Premises	Name of Premises	Supervisor	Animal	Summary of Experience
Work Experience							
Work Experience							
Work Experience							
Work Experience							
Work Experience							

# Work Experience Reference From

Student Name: \_\_\_\_\_

Dates of Work Experience: \_\_\_\_\_ Total Hours Completed: \_\_\_\_\_

## Business/Organisation Details

Business/Organisation Name: \_\_\_\_\_

Nature of Business/Type (e.g. Veterinary Practice, Dairy Farm, Companion Animal Clinic):  
\_\_\_\_\_

Address: \_\_\_\_\_ Telephone/Email Contact: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Supervisor Name: \_\_\_\_\_

Position/Role of Supervisor: \_\_\_\_\_

I hereby confirm that the above-named-student has completed the work experience as outlined.

Supervisor Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Business Stamp / Letterhead (if available):