

# NYSAVT Relief Technician Service Hospital Request Form

Today's Date: \_\_\_\_\_

## Contact Information

Contact Person \_\_\_\_\_

Hospital Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Dates Needed \_\_\_\_\_

## Work Schedule

- Full-time
- Part-time
- Days
- Nights
- Weekends
- Emergency Duty

Please fax, mail or  
email completed form  
to NYSAVT  
119 Washington Ave  
2nd Floor  
Albany, NY 12210  
P 518-426-7920  
F 518-432-5902  
nysavt@gmail.com

Salary / HR \_\_\_\_\_

## Practice Type

- Small Animal
- Large Animal
- Exotics

## Benefits

- Health Insurance
- Vacation
- Sick Leave
- Personal Time
- Continuing Education
- Other \_\_\_\_\_

## Skills Needed

- Lab Work
- Surgical Assisting
- Husbandry
- Anesthesia
- Blood Collection
- Catheter Placement
- Radiology
- Reception
- Computer Skills

## Additional Comments

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