



WILDLIFE REHABILITATION LICENSE APPLICATION



Please return completed application and required forms to:
CDOW, Special Licensing Unit, 6060 Broadway, Denver, CO 80216-1000
303-291-7143 (phone) 303-346-4541 (fax)

FEE EXEMPT

PLEASE PRINT INFORMATION IN THE WHITE CELLS. Please check the boxes next to the information you wish to have listed in a public directory, otherwise this information will only be listed with the CDOW and will not be distributed to the public.

<input type="checkbox"/> Name of Applicant:			
As required by the Colorado Child Support Enforcement Act, established through enactment of HB97-1205 and implemented through §26-13-126 C.R.S., an applicant's social security number (SSN) is now required for the purchase or application for all CDOW licenses. The SSN will not be displayed on any license. It will be provided when requested to the Colorado Department of Human Services – Child Support Enforcement as required by statute and will be used to enforce provisions of this law.			
SSN of Applicant:			
<input type="checkbox"/> Organization Name (if applicable):			
<input type="checkbox"/> Mailing Address:			
<input type="checkbox"/> City/State/Zip:			
<input type="checkbox"/> Home Phone:		<input type="checkbox"/> Work Phone and Extension:	
<input type="checkbox"/> Email Address:			
<input type="checkbox"/> Physical Location of Animal Care Facilities:			
<input type="checkbox"/> Veterinarian's Name:			
<input type="checkbox"/> Veterinarian's Address & Phone:			

Please indicate type of application by checking the appropriate box →	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Required supplemental Forms and Attachments:	Provisional Wildlife Rehabilitator	Upgrade to Full Wildlife Rehabilitator	Annual License Renewal
Form A - Documentation of Compliance with General Provisions of #1401	√	Updates only	√
Form B - Initial application for Provisional Wildlife Rehabilitator License	√		
Form C - Application for Wildlife Rehabilitator License (including upgrade)		√	
Form D - Annual Report Forms (for Provisional and Wildlife Rehabilitators)			√

"I certify the above statements and attachments are true. (The making of false statements in connection with obtaining a license is punishable as a misdemeanor.) I hereby authorize the Colorado Division of Wildlife to make further inquiries to verify these statements."

Signature (written): _____ **Date:** _____

If a license application is denied by the Colorado Division of Wildlife, either in person or by mail, the applicant may request a hearing within 60 days of receiving notice of denial as per §24-4-105 C.R.S. Any action is subject to judicial review as per §24-4-106 C.R.S.

**DOCUMENTATION OF COMPLIANCE WITH
GENERAL PROVISIONS OF CHAPTER 14 - #1401**

Who needs to complete and submit this form?

- I. All applicants for a Provisional Wildlife Rehabilitator License.
- II. All Wildlife Rehabilitator License holders that have changes to any of the provisions listed below.

The certifications, declarations and additional information listed on this form are required by all applicants for a Provisional Wildlife Rehabilitation License. Additionally, all current License holders must maintain full compliance, and report any changes.

PART 1. Certifications and Declarations.	Please initial each box to indicate compliance
1.) Pursuant to Chapter 14 #1401 A. 2. (a) (1), I certify that I am at least 18 years of age. I have attached to this application a photocopy of my current Colorado driver's license or Colorado state issued I.D. card.	[]
2.) Pursuant to Chapter 14 #1401 A. 2. (a) (2), I declare that I (check either "Do" or "Do Not" below): <input type="checkbox"/> Do not have any prior animal welfare violations, or suspension or revocation of any wildlife rehabilitation license issued by any state or by the U.S. Fish and Wildlife Service, or <input type="checkbox"/> Do have one or more prior animal welfare violations, or suspensions or revocations of one or more wildlife rehabilitation licenses issued by a state or by the U.S. Fish and Wildlife Service, as further described in a written statement attached to this application, as to type, place and date of such violation.	[]
3.) Pursuant to Chapter 14 #1401 A. 2. (a) (9), I certify that the proposed possession and treatment of wildlife is not in violation of any city or county ordinance. If applicable, I have attached photocopies of any required local permits.	[]
4.) Pursuant to Chapter 14 #1401 A. 2. (a) (10), I certify that the proposed wildlife rehabilitation activities will be in compliance with Colorado Department of Health and Environment statutes §25-4-602 through 606, and Colorado Department of Health and Environment Regulation 6CCR-1009-1 (Regulation 8).	[]
5.) Pursuant to Chapter 14 #1401 A. 2. (a) (12), I certify that I have read and understand the "Zoonoses Information and Prevention" packet provided by the Division containing general zoonoses information and procedures to minimize potential exposure to such diseases.	[]
6.) Pursuant to Chapter 14 #1401 A. 2. (a) (13), I certify that I have read and understand the information provided by the Division about Chronic Wasting Disease (CWD).	[]

PART 2. Additional documentation required.	Please initial box to indicate required attachment
1.) Pursuant to Chapter 14#1401 A. 2. (a) (5), I have arranged for a licensed veterinarian to examine and treat injured wildlife. I have explained that the Division is not responsible for reimbursing the veterinarian for services rendered. The veterinarian has attested to this arrangement in Part 3 below.	[]
2.) Pursuant to Chapter 14 #1401 A. 2. (a) (8), if I intend to rehabilitate Federally regulated species, I have attached a photocopy of my USFWS Special Purpose Rehabilitation Permit, if already issued, or a photocopy of the pending application. I understand that the rehabilitation of any Federally regulated species cannot be authorized by the Division until a photocopy of the permit has been provided.	[]

"I certify the above statements and attachments are true. (The making of false statements in connection with obtaining a license is punishable as a misdemeanor.) I hereby authorize the Colorado Division of Wildlife to make further inquiries to verify these statements."

Signature (written): _____ **Date:** _____

Applicant Name (printed): _____

PART 3. Consulting Veterinarian Agreement.

Notice: Applicants for a Colorado wildlife rehabilitation license are required to enter into an agreement with a consulting veterinarian to meet the requirements for issuance and maintenance of the license. The full set of license requirements are contained in Chapter 14 of the Colorado Division of Wildlife Regulations. The veterinarian and the applicant should sign, date and keep copies of this form.

Parties to the Agreement			
Name of Applicant:			
Consulting Veterinarian Name:		CO DVM Lic #:	
Clinic Name:			
Clinic Address (street, city, zip):			
Telephone Number:			
Veterinary Services Information			
Please describe the types of services you are willing to provide on a case-by-case basis for the Applicant (e.g., physical exam, initial stabilization, dispensing medication, surgery, radiology, euthanasia, training, etc.):			
What, if any, species will you not handle or assist with?			
Facilities			
Does your clinic have the facilities to treat wildlife with reasonable isolation from normal clinic activities? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Please briefly describe the facilities available for holding wildlife while in your clinic:			
Consulting Veterinarian Agreement			
I agree to act as a Consulting Veterinarian to examine and treat injured wildlife in assisting the license applicant's rehabilitation activities. I further agree to adhere to the provisions of Chapter 14 of the Colorado Division of Wildlife Regulations, including, but not limited to those described in #1405 A through I, and summarized below:			
<ol style="list-style-type: none"> 1.) A DVM must approve all medications, medical treatments, diagnostic and prognostic procedures. Anesthesia and surgery will be conducted only by a DVM or under direct DVM supervision. 2.) If the rehabilitator or DVM determines that any wildlife is not likely to survive, it must be euthanized immediately. 3.) Wildlife unlikely to recover should be euthanized as soon as possible within 180 days, unless approved otherwise by the Division. 4.) It shall be unlawful to provide wildlife care that seriously impairs the potential success of release back to the wild. 5.) Any DVM may render emergency care and treatment to sick or injured wildlife. Any such wildlife shall be transferred to a licensed rehabilitator within 24 hours. Any services rendered shall not create a financial obligation to the Division. 6.) Any DVM may euthanize injured wildlife if no other reasonable action would be practical, humane or effective. 7.) Any DVM euthanizing wildlife using chemical agents must provide for appropriate burial, incineration or other lawful disposition. 			

Veterinarian Signature _____ Date _____

Applicant Signature _____ Date _____

Note: Completion of this form does NOT authorize the consulting veterinarian to act as a licensed wildlife rehabilitator.

FORM D**WILDLIFE REHABILITATION LICENSE
ANNUAL RENEWAL APPLICATION**

Who needs to complete and submit this form? Anyone wishing to renew an existing wildlife rehabilitation license. Due by January 31.

- Part 1 – Annual Report.** This form is required for all renewals and reports all wildlife activity for the period ending December 31, and is required pursuant to Chapter 14 #1402A. and B. All sections of Part 1 are required (even to report “none”). Electronic versions of these forms in EXCEL are available on the Division’s website and are encouraged for larger annual caseloads.
- Part 2. – Unlicensed Individuals providing assistance.** This form reports the required specifics for any unlicensed individuals (volunteers, paid staff, interns) that have provided assistance during the year.
- Part 3 – Annual Learning Plan Update for Provisional Wildlife Rehabilitators.** This report provides progress towards the objectives listed in the Learning Plan.

For all of the prior year’s activity under my wildlife rehabilitation license (CO Lic # _____), I have completed and attached all of the applicable parts to this form. I am also submitting a completed Form A. I certify that Part 1 is a complete listing of all of the wildlife that I have admitted and treated, transferred, and/or released, including any wildlife pending at year-end.

_____ Please renew my wildlife rehabilitation license for another year.

_____ Please do not renew my wildlife rehabilitation license.

Signature of License Holder: _____ *Date:* _____

Name of License Holder: _____

PART 1. Annual Report. NOTE: All three sections are required, even if “nothing to report” on each.

The Division’s website has instructions, blank printable forms, and an electronic EXCEL spreadsheet for all three sections of the Annual Report. All wildlife rehabilitation licenses expire on January 31, unless the Annual Report, accompanied by Form A, is received on or before January 31 of each year. Please indicate below the method you are using to submit your Annual Report:

_____ I have printed out the Annual Report forms and have attached them to this renewal application.

_____ I have used the EXCEL Spreadsheet to complete the Annual Report and am submitted it electronically via email. All other required portions are attached to this renewal.

Section 1. ADMISSIONS/DISPOSITIONS Year-End Report Form. This form provides a chronological listing of each wild animal admitted to rehabilitation and the animal’s disposition (even if pending at year-end). It should specify original capture point and point of release. Transfers to/from other licensed rehabilitators should be traceable to the other rehabilitator’s Annual Report.

Section 2. “PENDING” REPORT from Prior Year Form. This form provides a listing of the animals held over from the prior year and indicates final disposition in the current year. All animals should be traceable to the prior year Annual Report.

Section 3. ANNUAL SUMMARY Report Form. This form provides a recap of the entire year’s activity, by species and by disposition. Any wildlife pending at December 31 should also be recapped on this form.

NOTE: For all Provisional Wildlife Rehabilitator Annual Reports, Sponsor review and approval is required.

Pursuant to Chapter 14 #1402 B., I have reviewed the accompanying Annual Report and consider it to be complete, accurate, and conform to the record and reporting requirements as specified in Chapter 14 #1402.

Signature of Sponsor _____ *Date* _____

PART 3. Annual Learning Plan Update for a Provisional Wildlife Rehabilitator.

The purpose of this portion of the Renewal Application is to describe progress during the year that the Provisional Wildlife Rehabilitator has made towards achieving the objectives as outlined in the Learning Plan.

Provisional Wildlife Rehabilitator:

Sponsoring Wildlife Rehabilitator:

Section 1. **Attach a copy the Sponsor Referral Form**, using it to describe all activities and accomplishments achieved during the past year. Please include references that tie the activities back to the originally submitted Learning Plan. Please also note any additions to the Learning Plan that were made during the year. As a minimum, please comment on the following subject/activity areas:

- Animal care skill and knowledge, including number and species of animals, mix of ages (juveniles v. adults), types of medical conditions.
- Providing first aid and administering medical care at veterinarian's direction.
- Cage and facility preparation, cleaning and maintenance.
- Preparing appropriate diets. Feeding appropriately (amounts, timing, methods, etc.). Preventing diet or feeding related problems.
- Safety (capture and handling techniques, disease prevention, etc.).
- Talking with the public about human-wildlife conflicts, whether or not an animal needs rehabilitation, etc.
- Making decisions about euthanasia and release. Conducting effective releases.
- Adherence to wildlife rehabilitation regulations.

Section 2. Please comment upon or list any other major accomplishments, including training, classes, or conferences attended.

We, the sponsoring Wildlife Rehabilitator and the Provisional Wildlife Rehabilitator, consider the progress to date to warrant renewal of this Provisional Wildlife Rehabilitation License in order to continue progress towards achieving all training objectives as outlined in the Learning Plan.

Signature of Provisional Wildlife Rehabilitator: _____ *Date:* _____

Signature of Sponsoring Wildlife Rehabilitator: _____ *Date:* _____