

Instructions for Veterinarians Completing the *Certification of Foreign Rabies Vaccination and Microchip Form*

Section A: Name, Address, Phone Number, and Email of Owner or Cosigner

- Enter the full name of the owner or cosignor.
- Enter the physical address of the owner or cosignor.
- Enter the direct dial phone number (including extension if applicable) of the owner or cosignor.
- Enter the email address of the owner or cosignor.

Section B: Name, Address, Phone Number, and Email of Recipient at U.S. Destination (Consignee)

- If all information in Section A is the same as Section B:
 - Check the box “Select if information is same as section A.”
 - Leave section B blank and move to Section C of the form.
- If any information in Section B is different from the information in Section A, complete section B:
 - Enter the full name of the recipient of the dog.
 - Enter the physical address (no PO Boxes) of where the dog will be housed in the United States.
 - Enter the direct dial phone number (including extension if applicable) of the recipient of the dog.
 - Enter the email address of the recipient of the dog (consignee).

Section C: Animal Identification

- Enter the animal’s name.
- Enter the ISO-compliant microchip number and the date the microchip was implanted. If the implant date unknown, input earliest date when ISO-compliant microchip is documented on dog’s medical/vaccination records.
- Enter the dog’s breed and sex (gender).
- Enter the dog’s date of birth using the mm/dd/yyyy¹ format or age if the date of birth is unknown.
- Enter the dog’s color or note any distinguishable markings on the dog.

Section D: Rabies Vaccine Information

Include all information below for at a minimum a current rabies vaccination. If the importer is presenting a valid rabies serology titer, also document a rabies vaccination administered at least 30 days before the serology was drawn, and all rabies vaccinations administered after the dog’s rabies serology was drawn, to prove that vaccination coverage has not lapsed.²

- Enter the rabies vaccine product name, manufacturer, lot (serial) number, and product expiration date using the mm/dd/yyyy¹ format.
- Enter the date the dog was vaccinated against rabies using the mm/dd/yyyy¹ format.
- Enter the date the next vaccination is due using the mm/dd/yyyy¹ format.

Section E: Rabies Serology Information (if available)

Rabies serology results from a [CDC-approved laboratory](#), if available, must be submitted with this form for certification by the official government veterinarian.

- If the owner or cosignor provides rabies serology results:
 - Enter the laboratory name and country where the laboratory is located.
 - Confirm the results from a [CDC-approved laboratory](#).

¹ Failure to input the date using the correct mm/dd/yyyy format is grounds for the dog to be denied entry into the United States and returned to the country of departure at the owner or importer’s expense.

² If there is insufficient space on the *Certification of Foreign Rabies Vaccination and Microchip form*, additional copies of *Certification of Foreign Rabies Vaccination and Microchip form* should be used.



- Enter the date the sample was collected using the mm/dd/yyyy¹ format.
- Enter the date the sample was tested using mm/dd/yyyy¹ format.
- Enter the result reported by the laboratory including units.
- If the owner or consignor did not provide rabies serology results for review:
 - Check box “select if no serology results are included with this form.”

Section F: Examining Veterinarian Certification Statement and Signature

This form MUST be completed and signed by the veterinarian who examined the dog.

The examining veterinarian must be authorized by the competent authority to practice veterinary medicine in the exporting country or be an official government veterinarian.

- Read and verify Section F, statement 1-9
 - Select the appropriate bullet for statement 6 based on the dog’s vaccination records.
- Print your name and title (e.g., associate veterinarian, etc.).
- Enter the physical street address including city, region/state, and country of the veterinary clinic or hospital where you work.
- Enter the veterinary business’ telephone number.
- Enter the veterinary business’ email address.
- Enter the license number of the examining veterinarian.
- Enter the date of examination when this form was completed using the mm/dd/yyyy¹ format.
- Electronically sign the form using an authenticated digital signature (e.g., DocuSign).
 - Wet signatures are acceptable in the “veterinarian’s signature” block if the document cannot be signed electronically, however, Sections A-F must be typed.
- Submit the form and all accompanying documentation to the exporting country’s official government veterinarian for review and certification.

Section G: Endorsement by Official Government Veterinarian in Exporting Country

- Verify the animal’s name and microchip listed on page 2 match the information listed on page 1 of this form.
- If available, review the attached rabies serology results and certify the serology results are: (1) from a [CDC-approved laboratory](#); and (2) greater than or equal to 0.5 IU/mL.
- Read and verify Section G, statements 1-4.
- Print your name and title.
- Enter your physical street address including city, region/state, and country.
- Enter your telephone number and government email address (personal email addresses are not acceptable).
- Enter the date you reviewed and certified the information using the mm/dd/yyyy¹ format.
- Electronically sign the form using an authenticated digital signature (e.g., DocuSign).
 - Wet signatures are acceptable in the “official government veterinarian’s signature” block if the document cannot be signed electronically. An official wet seal must be affixed to all forms with wet signatures.
- Affix the government seal electronically or apply a wet seal in the space provided.