



Cervid Chronic Wasting Disease Surveillance Identification (CCWDSI) Herd Certification Program (HCP) or Herd Monitoring Program (HMP) Application – Page 1

The application package consists of four pages: 1) application, 2) census report (if applicable), 3) veterinarian of record verification, and 4) program acknowledgement. There is also an addition form and deletion form for your convenience. Please feel free to contact our office if you have any questions or concerns regarding this material.

This application can only be approved after the Kentucky Department of Fish and Wildlife application and requirements are met. The phone number for that agency is (502) 564-3400.

A separate application shall be completed for each program, as indicated below.

Herd Certification Program (HCP)

Herd Monitoring Program (HMP)

(PLEASE PRINT CLEARLY)

Owner: _____ Phone: _____

Email Address: _____

Business Name: _____

Physical Address: _____

City: _____ State: _____ Zip: _____ County: _____

Mailing Address (if different from physical): _____

City: _____ State: _____ Zip: _____ County: _____

Manager (if different from owner): _____ Phone: _____

Manager (if different from owner): _____ Phone: _____

(List additional Owner/Manager information on the back of this sheet)

Herd Location (Driving Directions) _____

Type of Cervid:
Species of Cervid:



**Cervid Chronic Wasting Disease Surveillance Identification (CCWDSI)
HCP or HMP Application – Page 2**

Veterinarian of Record Verification

Owner/Manager Name: _____

Business Name: _____

Veterinarian

KY Veterinary License Number

Accreditation Number

Email Address

Physical Street Address, City/State/Zip

Mailing Street Address (if different from physical), City/State/Zip

Main Phone Number

Alternate Phone Number

As a licensed and accredited veterinarian in Kentucky, I certify that I have a valid veterinarian-client- patient relationship with this entity.

Veterinarian Signature

Date



HCP or HMP Application – Page 3

Producers Verification of Census Form

May use this form or provide electronic spreadsheet with the required fields only.

Complete this document by listing all cervids that are officially tagged.

Owner/Manager Name: _____

Business Name: _____

Number of tagged animals: _____ Number of fawns: _____ Number in herd: _____

	Official Identification Number	Secondary ID	Age	Sex	Species
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
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24					
25					



Cervid Chronic Wasting Disease Surveillance Identification (CCWDSI) – Page 4

Program Acknowledgement

Owner/Manager Name: _____

Business Name: _____

Application

Payment of Application Fee

- Initial Fee is \$150 for Herd Certification Program and \$500 for Herd Monitoring Program.
- Renewal Fee for Herd Monitoring is \$500
- Renewal for Herd Certification Program- See table

Number of Cervids in Herd	Fee if paid before December 1	Fee if paid between December 1 and 31	Fee if paid after January 1
1-50	\$135	\$150	\$250
51-100	\$250	\$275	\$375
over 101	\$450	\$500	\$600

Veterinarian of Record Verification (Required if veterinarian has changed in the previous year.)

Producer Verification of Census Form (or electronic spreadsheet with the required fields only.)

Herd Additions/Deletion forms (if applicable)

Complete CCWDSI Education Module and Applicable Quiz

For certification of enrollment into the CCWDSI Program in Kentucky, **ALL** items on this program acknowledgement must be returned to the Office of State Veterinarian **prior** to December 31st.

By signing below as an approved program participant, I acknowledge and agree to perform the activities listed below: Complete CCWDSI education module and submit quiz with renewal. (Must pass with 70% grade)

- Make a check or money order payable to Kentucky State Treasurer for each program location. Submit check with application paperwork to the Office of the State Veterinarian.
- Identify all cervids 12 months of age and older with a USDA approved official radiofrequency identification device (RFID) and a secondary identification device. 302 KAR 22:150
- Follow all testing and reporting requirements that are listed under 302 KAR 22:150
- Complete and file an annual herd census.
- Create and maintain complete herd records under 302 KAR 22:150
- Notify the herd veterinarian within 24 hours after observing any signs or symptoms suggestive of CWD in the herd.

Owner/Manager Signature _____ Date _____



HERD ADDITIONS

Natural Additions

Date of Birth	Official ID	Secondary ID	Species	Age	Sex

Purchased Additions

Date of Addition	Official ID	Secondary ID	Species	Age	Sex	Name of Seller	Seller Address



HERD DELETIONS

Deaths

Date of Birth	Official ID	Secondary ID	Species	Age	Sex	Cause of Death

Animals Sold

Date of Sale	Official ID	Secondary ID	Species	Age	Sex	Name of Buyer	Destination Address of Buyer

CCWDSI Continual Education Quiz

1. What is the required method of Identification for Cervids in Kentucky?
 - a. Official NUES tag and a visual/flop tag
 - b. Two visual/flop tags
 - c. Official RFID tag and a visual/flop tag
 - d. None of the above
2. Which Cervids are **NOT** required to be submitted for CWD testing?
 - a. Cervids 12 months or older taken by harvest
 - b. Cervids under 12 months of age that die
 - c. Cervids 12 months or older that die from illness
 - d. Cervids that die during Laparoscopic artificial insemination
 - e. All Cervids are required to be submitted for testing
3. Once certified by the Office of State Veterinarian (OSV), when does the CWD Sample Collector's Certification expire?
 - a. One (1) year from the date certified
 - b. Three (3) years from the date certified
 - c. Five (5) years from the date certified
 - d. Certification last until the individual exits the program
4. According to Kentucky Department of Agriculture regulations when are fawns required to be individually identified and reported on inventory?
 - a. At the time annual inspection
 - b. Only when moved to another herd
 - c. At 12 months of age
 - d. Immediately after birth
5. What are common symptoms observed in animal that has CWD?
 - a. Excessive weight loss
 - b. Circling or disorientation
 - c. Excessive drooling
 - d. All the above signs are recognized to be associated with CWD infection
6. Cervids showing signs of CWD should be:
 - a. Reported to herd veterinarian or OSV within 24 hours
 - b. Harvested immediately, no testing needed
 - c. Only watched for continued signs of disease
 - d. Treated with antibiotics to clear prion infection
7. Which laboratory listed below is approved for CWD sample submission for Kentucky CWD program participants?
 - a. Breathitt Veterinary Center (BVC)
 - b. University of Kentucky Lab (UKL)

- c. National Veterinary Services Laboratory (NVSL)
 - d. All of the above are
8. What is the procedure of reporting cervid escapes?
- a. Report to OSV within 7 days
 - b. Report to OSV within 48 hours and provide updated inventory within 7 days
 - c. Report to OSV within 48 hours
 - d. Report at your next quarterly inspection
9. Which is **NOT** an accepted method of reporting deaths or escapes, of cervids within the cervid program?
- a. Email
 - b. Phone call or text message
 - c. Fax
 - d. Written documentation by mail
10. What is the appropriate timeline when reporting deaths?
- a. 48 hours
 - b. 72 hours
 - c. 7 days
 - d. 14 days
11. What is required to move cervids from your premises to the premises of another producer within Kentucky? One farm to another?
- a. No documentation or approval is required
 - b. Certificate of Veterinary Inspection (CVI) only
 - c. A Certificate of Veterinary Inspection (CVI) and A permit issued by the OSV
 - d. Verbal approval of OSV representative
12. What animal records are required to be maintained by all Cervid Program participants?
- a. Complete real time inventory with age, sex, official I.D.'s for each individual animal
 - b. Record for each natural addition or purchased animal to the herd including, proper CVI documentation from origin
 - c. All deaths and associated CWD test results for test eligible cervids
 - d. All of the above are proper required documentation to keep on file and present to OSV upon request.