

Tammy S Cargile **Executive Director**

ALABAMA STATE BOARD OF VETERNARY MEDICAL EXAMINERS 8100 SEATON PLACE--SUITE A **MONTGOMERY AL 36116** (334) 395-5112 (334) 395-5117(fax)



www.asbvme.alabama.gov

LICENSE VERIFICATION REQUEST AND AUTHORIZATION:

Name: NICOLE M METCALF License #: 5695

I authorize the Alabama State Board of Veterinary Medical Examiners to release information in regards to the status and standing of my license to practice veterinary medicine and/or surgery in the State of Alabama

ALABAMA BOARD VERIFICATION:

APPLICANT LICENSE NUMBER:	<u>5695</u>	DATE ISSUED:	<u>08/29/2006</u>
Qualifications for license in year of issue:	<u>GRADUATE -</u>	<u>MA 2000, the STA</u>	<u>TE EXAM</u>
Current License Status:	ACTIVE STAT	TUS EXPIRATION	<u> DATE. 12/31/2025</u>
Disciplinary Action?	⊠ NO		S
Current Disciplinary Action?	⊠ NO	T YES	S
Pending Disciplinary Action?	⊠ NO	T YES	S

If yes to any disciplinary action, you will find attached a certified copy of the Finding of Fact, Conclusions of Law, and /or Final Order, or the charges of a pending case.

Board Signature:

am anile

Date: 05/30/2025

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