



Kentucky Public Health
Prevent. Promote. Protect.

Cabinet for Health and Family Services
Kentucky Department for Public Health

Renew Qualified Person Form

In accordance with 902 KAR 2:070, a qualified person shall annually renew their permit to vaccinate a dog owned by that individual between January 1 and February 28 each year unless the permit has been suspended, revoked or cancelled. A copy of the certificate of approval to administer a rabies vaccination shall accompany this form.

Date: _____
Qualified Person Name: _____
Street Address: _____
City, State, Zip: _____
Telephone: _____
Email: _____

Mail to:
Qualified Person Administrator
Dr. Kelly Giesbrecht or Brenda Garcia
Kentucky Department for Public Health
Division of Epidemiology & Health Planning
275 E. Main St., HS2GWC
Frankfort, KY 40621
Fax (502)564-9626

Or email to:
kelly.giesbrecht@ky.gov
bgarcia@ky.gov

Our Mission: To improve the health and safety of people in Kentucky through
Prevention, Promotion and Protection

Our Vision: Healthier People, Healthier Communities.

Our REACH Values: Responsiveness Equity Accountability Collaboration Honesty

