

Statement of participation

This is to acknowledge that

Mr A Pharmacist

completed the following modules of the

Practice Improvement Training Program

Module 1: The reasons for referral

Module 2: The process for referrals

Module 3: Information gathering skills

Module 4: Information giving skills

Module 5: Handling difficult situations

Module 6: Managing conflict

Delivered by:

Mrs Another Pharmacist

Another Pharmacist

Pharmacist signature

22nd September 2010

Date