



## 1.4B Employer Verification -supervised practice

Registrant (Member) Name \_\_\_\_\_ CMLPSK ID: \_\_\_\_\_

'Re-entry to Practice' applicant is required to successfully\* complete a minimum number of practice hours under direct supervision of one or more CMLPSK - licensed MLT(s), prior to being eligible for a practicing licence.

I, \_\_\_\_\_, employer/supervisor verify that  
*(Name of employer/supervisor)*

\_\_\_\_\_  has  has not successfully completed \_\_\_\_\_  
*(Name of MLT)* *(no. of hours)*

supervised Practice hours.

Practice hours were obtained in the following fields of practice, including general categories listed below:

- Specimen collection
- Preparation and Testing
- Evaluation and Interpretation
- Reporting and Communication
- Equipment and Resources
- Safety
- Professionalism
- Quality Assurance

Chemistry: Facility(s): \_\_\_\_\_

Hematology: Facility(s): \_\_\_\_\_

Transfusions: Facility(s): \_\_\_\_\_

Microbiology Facility(s): \_\_\_\_\_

Histology Facility(s): \_\_\_\_\_

The above-named registrant has worked as an MLT and has been deemed competent to work in the department(s) listed above.

Employer/Manager signature

Email Address \_\_\_\_\_

Phone: \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

\* Successful supervised practice: Supervision is intended to provide a mechanism to ensure safe, ethical and quality medical laboratory practice in the interest of public protection until such time as the Provisional registrant meets all the requirements for independent practice and can be issued a Practicing licence.

If a registrant cannot meet the requirements or is deemed to be unsafe, the Provisional licence will be revoked.