



## CERTIFICATION OF COMPETENCE AND EXPERIENCE

To be completed a nominated supervisor

***Nominated supervisor:** Must be a registered health practitioner with a current practising certificate. Day to day oversight of the practitioners work may be under a number of different staff. The nominated supervisor is responsible for regular reviews of the practitioners work including feedback from the latter.*

I am providing this reference for \_\_\_\_\_ (name of applicant), and their registration number is: 30-0\_\_\_\_\_ and they work in the area of \_\_\_\_\_.

**My Name**

.....

**My registration number**

.....

**My Position Title**

.....

**Email Address**

.....

**I certify the applicant has worked in an ISO 15189 medical laboratory for:**

**YY/MM**

.....

I certify that the applicant meets the following competencies	Please Sign each Statement
Practises within legal and regulatory requirements	
Practises within the policies and protocols of the employing laboratory	
Demonstrates current knowledge and practical competence in the relevant medical laboratory science discipline	
Practises safely in accordance with health and safety legislation and workplace safety policies and protocols	
Communicates effectively (both oral and written) with patients, colleagues, other professionals and the public.	
Takes the socio-cultural values of others into account in all aspects of daily practise.	

**DECLARATION**

I confirm that the above information is true to the best of my knowledge.

\_\_\_\_\_  
Signed

\_\_\_\_\_  
Date

**Note:** Under Section 172 of the Health Practitioners Competence Assurance Act 2003 every person commits an offence if they make any declaration or representation that, to their knowledge is false or misleading, and may be liable on summary of conviction to a fine not exceeding \$10,000