

Work Experience Reference

Applicants should read in full the *APC Work Experience Template Explanatory Notes* located on page 3 of this form prior to completing this form.

Note that all fields in this form must be completed, failure to complete this form correctly will result in a delay of the assessment process.

This form must be signed to be considered valid.

Applicant details	
First name	
Last name	
Other name/s	
Date of Birth	___ / ___ / _____ <i>(dd / mm / yyyy format)</i>

Employer/Referee details					
Title	<i>(Mr, Ms, etc.)</i>				
First name					
Last name					
Job Title					
Organisation name					
Official organisation address					
Official organisation email address					
Official organisation phone number(s)					
Professional relationship to applicant	<i>(eg. manager, supervisor, head of department, etc.)</i>				
Applicant's job title					
Applicant's employment start date	___ / ___ / _____ <i>(dd / mm / yyyy format)</i>				
Applicant's employment finish date	___ / ___ / _____ <i>(dd / mm / yyyy format)</i>				
Applicant worked	<table border="1"> <thead> <tr> <th>Full time (20+ hours per week)</th> <th>Part time (less than 20 hours per week)</th> </tr> </thead> <tbody> <tr> <td></td> <td></td> </tr> </tbody> </table>	Full time (20+ hours per week)	Part time (less than 20 hours per week)		
Full time (20+ hours per week)	Part time (less than 20 hours per week)				

Applicant duties in role	

Declaration

To be completed by the Employer / Referee.

By making this declaration, I hereby certify that:

I understand the Australian Pharmacy Council may contact me for further information regarding this applicant.

I confirm the information that I have provided for this applicant is true and correct.

Signature of Employer / Referee **Date**

Stamp of the Employer / Referee / Organisation

Explanatory notes

Summary

The Australian Pharmacy Council Ltd (APC) is designated as the independent accreditation agency for the profession of pharmacy under the National Registration and Accreditation Scheme. One of the APC's roles is to assess the qualifications and skills of overseas trained pharmacists through an application process. Applicants with work experience as a retail or hospital pharmacist can choose to provide evidence of work experience to the APC for review and assessment. While the APC is authorised to assess pharmacists for the purpose of providing skills assessments, the decision to award points for qualifications and skilled employment remains with the Department of Immigration and Border Protection (www.border.gov.au).

Process for an APC work experience review

Applicants who wish to have the APC comment on work experience should use the APC Work Experience Reference template for evidence of work experience. Applicants should give this template to any and all current or former employers to fill out as evidence of work experience as a retail/hospital pharmacist.

The form(s) should be completed, signed and dated and stamped (if possible) by the referee and the **original copy** (with the original signatures) sent back to the APC.

Applicants should make a copy of the reference for their records and send the form with the original signature back to the APC.

All information should be completed – Failure to provide complete details will result in a delay processing the application.

Process for applicants who do not want and APC work experience review

Applicants who are happy for the APC to proceed with their assessment application without commenting on work experience, will need to provide a Commonwealth Statutory Declaration confirming they do not want the APC to review their work experience. The statement must include your signature and be witnessed by an authorised person and can be downloaded from the Australian Government Attorney-General's Department: <http://www.ag.gov.au/Publications/Pages/Statutorydeclarations.aspx>