

Change of training details

To be sent to the General Pharmaceutical Council as soon as changes are known. **This form should be completed if there is a change to your training placement and/or your tutor or an extension to your training period.**

Personal details

To be completed by trainee

Full name of trainee:

Trainee's GPhC number:

Full name and address
of current or previous
training site:

GPhC Pharmacy Registration No:

Change of placement

Is this new placement in a site that is part of the
same company as your previous training?

Yes

No

If 'No', please tick to confirm you understand the following:

I confirm I will fully disclose the reason why I left my previous training site and will disclose any matters relating to my fitness to practise to my new tutor

I understand that if I move to a new company to train, that I will be starting my training from day one unless I have "banked" any of my previous satisfactory training

Full name and address of new
training site:

GPhC Pharmacy Registration No:

Training site expiry date:

Is your site approved to provide training
for all of your training period?

Yes

No

Please note you cannot start training until your site is approved for the entirety of your training period.

Continued overleaf...

Are you an owner, a director, or a majority shareholder of any of the establishments named on this form?

Yes

No

Are you related to a director, or have a relationship with a director or employee of the appointing pharmacy?

Yes

No

Please note you cannot train at a training site where you have a relationship or business interest with a director or employee.

Start date at new site:

PLEASE NOTE: All correspondence from the GPhC will be sent to this address. It will take at least 2 weeks from receipt of this form for correspondence to start arriving at this new address so please make arrangements for any mail to be forwarded from your previous training Site.

Change of tutor

Full name of new tutor:

GPhC number:

Telephone no:

E-mail Address:

Has your tutor been a registered pharmacist for at least three years?

Yes

No

Is your tutor currently under investigation by GPhC?

Yes

No

Please note if your tutor does not meet the above GPhC tutoring requirements this person will not be able to act as your tutor.

Date of change:

YOUR NEW TUTOR NEEDS TO COMPLETE THE NEXT PAGE OF THIS FORM.

Extension to training

Revised finish date:

Pre-registration learning contract

To be completed by tutor

Full name of trainee:

Trainee's GPhC number:

This contract details the agreement between the Pre-registration tutor and trainee of key aspects of working together. It clarifies what is expected of each party. It should be discussed and signed by both parties at the outset of any training period commencing with a new tutor.

I, (insert your name and GPhC registration number)

make the following commitments to you, (insert trainee's name)

for the duration of your Pre-registration training with me. **I will**

- abide by the GPhC Pre-registration scheme requirements
- provide and arrange training that will enable you to develop all the skills, attitudes and knowledge defined by the GPhC Performance standards including the GPhC Standards of conduct, ethics and performance
- work with you to identify your individual learning needs
- ensure that we both keep up-to-date with GPhC requirements and endeavour at all times to meet them
- treat you in a manner that is conducive to your learning. This will include:
 - giving you the opportunity to contribute and put forward your views
 - providing you with appropriate time to study and reflect on your learning (by mutual agreement)
 - being approachable and providing help when asked or referring you to a more appropriate source of help
 - setting targets for you through a process of negotiation with you
 - explaining and repeating explanations as necessary
 - challenging and questioning you to check your understanding
 - encouraging and supporting you when you find situations challenging
- adapt plans as appropriate
- enable you to have access to off-the-job study days and training events, as appropriate
- inform, support and confer with others involved in your training
- set aside time to review your progress regularly, both informally and formally
- provide you with constructive and honest feedback to aid your development
- provide feedback on your progress to the Pre-registration team at the set times and in the required manner
- assess you objectively - or arrange for others to do so - in all the Performance standards specified by the GPhC based on a range of evidence which you provide to me and taking account of feedback from other people involved in your training
- identify and address my own learning needs in relation to being a tutor
- welcome feedback from you to help me develop my tutoring skills
- endeavour to ensure that, in my absence or when you are working elsewhere, a suitable person is available to support and guide you.

Signature of tutor:

Date:

Signature of trainee:

Date:

FOR OFFICE USE ONLY

Premises code

Initials

Trainee file updated

Date

Training record sent