SAMPLE MEMO

Date:

Memo To: Peterborough Regional Health Centre

From: (name of college/university)

The student identified below is completing a placement at the Peterborough Regional Health Centre for (type of placement) . The program the student is enrolled in is for (name of program) at (name of college/university) from (start date) to (end date) . As part of the requirements for the placement, this memo is to confirm the student has met the following criteria:

1. The student is in good standing with the college/university;
2. The student has a completed Criminal Record Search including Vulnerable Sector Check on file with the college/university dated within one year from the placement start date and it is clear;
3. The student has demonstrated immunity, specifically for Measles, Mumps, Rubella, Varicella, Hepatitis B and Influenza;
4. The student has completed a two-step Tb screening as per the Ontario Hospital Association Communicable Disease Guidelines of which the results are on record at the college/university.
5. The student has completed modules/training for WHMIS, Ontario Ministry of Labour Workers Health and Safety Module 4 Steps, a Workplace Violence Prevention Program (e.g. NVCI, CPI, SMG) and the Accessibility for Ontarians With Disabilities Act;
6. The student has completed the Confidentiality Form and the Postsecondary Unpaid Work Placement Release Form provided by PRHC;
7. Validation Mask Fit testing has been completed.

All of the above documentation will be retained by the college/university. If you need to verify any of the above information, the documentation will be accessible to you.

STUDENT NAME

|  |
| --- |
|  |
|  |
|  |
|  |
|  |

Best regards,

(Coordinator’s Name, Mailing Address, Telephone Number )