

# Pharmacy Experience Tracking Sheet

Conditional Admission to Pharmacy (CAP) 2023



UNIVERSITY OF  
**WATERLOO**

SCHOOL OF  
PHARMACY

Waterloo ID:

Name:

This form must be completed and submitted to [pharmacy.advisor@uwaterloo.ca](mailto:pharmacy.advisor@uwaterloo.ca) by **January 10, 2025.**

Pharmacy Name	Date(s) Worked/ Volunteered	Total Hours	Pharmacy Address and Phone Number	Brief Summary of Experience	Registered Pharmacy Professional* Name and Registration (e.g. OCP #)	Registered Pharmacy Professional* Signature
<b>Grand Total Number of Hours Completed</b>						

\* Registered pharmacy professionals include Pharmacists (RPh) or Pharmacy Technicians (RPhT) in Ontario. In some other provinces, only pharmacists are registered pharmacy professionals.