

Supervisory Agreement

The P.E.I. College of Physiotherapy allows a recent graduate from a Canadian Physiotherapy Educational Program, who has met all other requirements on PEI for license but has not taken the Physiotherapy National Exam, to be engaged in direct patient care as a Physiotherapy Resident under the on site supervision of a licensed Physiotherapist.

I agree to provide the supervision of the Physiotherapy Resident identified below in accord with the P.E.I. authorization regulation, section 14(c), during the period he/she is working on Prince Edward island.

Signature of supervising therapist

Date

We both further agree to notify the PEICPT if this agreement is terminated for any reason.

Signature of Supervisor

Signature of Physiotherapy Resident

Type/print name of Supervisor

Type/print name of PT Resident

License number

PT. Education Program attended

Facility of Employment: _____

Address: _____

Date of Employment: _____