

Please complete all the sections of CPSA's PRA-AB Narrative Report below. The form outlines three main competencies: Professionalism, Medical Expert and Communication. Please discuss the completed report with the applicant, before you each sign and date this report on page 4.

**Type of assessment:** \_\_\_\_\_ Interim \_\_\_\_\_ Final \_\_\_\_\_

**Assessed from:** \_\_\_\_\_ **to:** \_\_\_\_\_

**Specialty:** \_\_\_\_\_

**Applicant's name:** \_\_\_\_\_

**Assessor's name:** \_\_\_\_\_

**List any additional assessors involved in the assessment:**

**Professionalism** Tell us about the applicant's attitude, respect of staff and patients, how they receive feedback and other elements of their professional behaviour.

**Medical Expert** Tell us about the applicant’s medical knowledge base, clinical reasoning and decision making skills, and other elements of their medical skills.

**Communication** Tell us about the applicant's communication with colleagues, allied health staff, patients and others.

**Please check the overall evaluation rating for this applicant:**

Satisfactory

Needs Improvement

Unsatisfactory

**Continue to next page to [sign and date](#)**

Both the Assessor and Applicant must sign and date below before submitting the completed form to CPSA. Your signatures indicate you have both seen all the information on this form.

**Signing instructions:**

Assessor: Once you and the applicant sign the form below, you'll be prompted to save a copy of this document to your computer. Once saved to your computer, hit 'Submit' below. This will automatically open an email to CPSA with the signed document attached. Make sure you also attach any other assessment documents, like FITER, DOPS, invoices, etc.

\_\_\_\_\_  
Assessor signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Applicant signature

\_\_\_\_\_  
Date

**If you are unable to sign electronically and use the submit function please email us the signed documents at [RegistrationAssessments@cpsa.ab.ca](mailto:RegistrationAssessments@cpsa.ab.ca).**