

Pharmacy Retail Assistant Orientation Form

Full Name

Date of Orientation

Location / Branch

Supervisor Name

Personal Details

Contact Number

Start Date

Orientation Checklist

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Introduction to Pharmacy Staff & Tour

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Health & Safety Procedures

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Customer Service Training

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Handling Medications & Inventory

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POS Operation & Cash Handling

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Review of Store Policies

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Uniform & Appearance Guidelines

Additional Notes

Notes / Comments

Signatures

Assistant Signature

Supervisor Signature

Date