

## CERTIFICATE OF COMPLETION OF HOUSEMANSHIP TRAINING (CCHT)

PHOTO

HOSPITAL		
NAME	IC NO.	

	POSTING	DURATION OF POSTING	HOSPITALS	PERCENTAGE	GRADE	NOTES /COMMENT
1		START: END:	1. 2.			
2		START:	1. 2.			
		START:	<ol> <li>3.</li> </ol>			
3		END:	2. 3.			
4		START: End:	1. 2. 3.			
5		START: End:	1. 2. 3.			
6		START: END:	1. 2. 3.			
	FINAL (AVERAGE)					

SIGNATURE	OF HO	SPITAL	DIRECTO	)R:

NAME:

DATE:

STAMP:

## **NOTE: GRADING OF CCHT**

CATEGORY	PERCENTAGE (%)	GRADE
EXCELLENT	≥ 90%	4
GOOD	85% - 89.9%	3
SATISFACTORY	<b>75</b> % <b>- 84.9</b> %	2
PASS	60% - 74.9%	1