



SwAPP

Swiss Association of Pharmaceutical Professionals

CH-3000 Bern

Summary of Theoretical Training for *Specialty Diploma Regulatory Affairs*

Last name/First name/Title: _____ Date of Birth (D/M/Y): _____ Sheet No.: _____

No	Event														
Match with attachments	Titel of Event Place/Organiser/Date	CH regulations and laws	CH regulatory submissions	Submissions and approvals clinical trials	Pharmacovigilance	Life cycle management	Promotion pharmaceutical products CH	SM operating approval and responsible person	Reimbursement and pricing CH	Special regulations medical devices	EU/US regulatory submissions	Clinical aspects of drug development	Other courses in core fields	Courses in pharmaceutical medicine	Relevant literature
		9.5	15	4	4	4	4	4	4	5.5	4	4	28	20	10
Total hours per specialty area:															

Add sheets as needed, add up total hours on last sheet. Attach a certificate for each training. Send to SwAPP, 3000 Bern or education@swapp.ch

Place and Date

Signature of Applicant: