



CITY UNIVERSITY  
LONDON

**STUDENT'S VIDEO OF INTERACTION WITH CLIENT  
- CLINICIAN'S CONFIRMATION**

This is to verify that the video submitted by the student:

(name)

.....

is an example of his/her interaction with a client. I can confirm that the student has received no feedback from me about this client in the exam video session.

SIGNED:.....

(PRINT EDUCATOR'S  
NAME).....

PLACEMENT  
ADDRESS:.....

.....

.....

For student to return to the Division of Language and  
Communication Science, City University