**Credentialing for Nurses – Employer Statement Template**

**EMPLOYER STATEMENT**

You are required to provide evidence that you have worked at least 12 weeks FTE in your specialty over the last 12 months, or 24 weeks FTE in your specialty in the preceding 2 years, or 36 weeks FTE in your specialty in the preceding 3 years. You can demonstrate this by providing a statement from your employer(s), which states the following:

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| **Name of applicant:**  Click here to enter text. |
| **Specialty area of practice:**  Click here to enter text. |
| **Employer name and contact details:**  Click here to enter text. |
| **STATEMENT:**  I confirm that Click here to enter text. was employed at Click here to enter text. from Click here to enter a date.to Click here to enter a date.**.** |
| **Title of applicant’s position(s):**  Click here to enter text. |
| **Applicant’s hours of employment:**  Click here to enter text. |
| **Please advise any breaks in employment during this period i.e. unpaid leave:**  Click here to enter text. |
| I confirm that this/these position(s) required specialist Click here to enter text. knowledge and skill. |
| **Name of person completing declaration:**  Click here to enter text.  **Position of person completing declaration:**  Click here to enter text.  **Signature:**  **Date:** Click here to enter a date. |