|  |  |
| --- | --- |
| **Full Name** |  |
| Qualifications (Education and Professional) in descending chronological order |

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| --- | --- | --- |
| Qualification | Education Institution | Year |
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|  |  |  |
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|  |  |  |

 |
| Current Professional Registration  |  |
| Photo of SNB Practising Certificate (PC) Displaying PC Number & Expiry Date |  |
| Current Designation & Department |  |
| Employment History in descending chronological order1. Year/Period
2. Employer Name
3. Designation
4. Area of work
 |

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| --- | --- | --- | --- |
| Year/Period | Employer Name | Designation | Area of Work |
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| Current & Valid Professional Associations Membership (e.g., SNA), including the date joining and role.  |  |
| Evidence of currency of nursing competencies in one’s scope of practice in the past 2 years, including date/month and year of completion.For example: 1. Evidence of ongoing professional practice in area of specialty/ expertise including time spent in area of practice/expertise
2. Workshops and conference
3. Competency training
4. Simulation training
5. Webinars
6. In-service trainings
7. Short courses
 |  |
| Records of Continuing Professional Education (CPE) completed in the last 2 years, including CPE dates. These records should reflect training relevant to the job scope. |  |
| Remarks(e.g., when are assessors involved in the assessment - classroom, skills lab, or OJT?) |  |