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| --- | --- |
| Name |  |
| Qualifications (Education and Professional) |  |
| Current Professional Registration  |  |
| Current Position/Designation |  |
| Employment History in descending chronological order* Name of employer
* Designation
* Area of work
* Year/Period
 |  |
| Current Professional Associations Membership |  |
| Evidence of currency of nursing competencies in one’s scope of practice (e.g. through self assessment, evidence of ongoing professional practice in area of speciality/expertise - time spent in area of practice/expertise etc) |  |