# Faculty of Health, Social Care and Medicine

# School of Nursing, Midwifery and Applied Health and Social Care

# RP(E)L referee confirmation form

Our PGDip (all fields) second registration programme permits entry for applicants who already hold a current registration with the Nursing and Midwifery Council. It is an NMC requirement that on entry to the programme, applicants must be able to evidence that they have worked as registrant in their **intended second field** of nursing.

The following applicant has identified you as someone who can confirm that they have met this requirement.

Applicant Name: …………………………………………………………………….

Date of birth: …………………………………………………………………….

Current field of nursing…………………………………………………………….

Intended second field of nursing…………………………………………………….

Name of programme: ………………………………………………………………

Programme Lead: ……………………………………………………………………

Verification statement:

I confirm that the above named NMC-registered nurse has worked as a registrant in the intended second field of nursing.

I agree to be contacted by Edge Hill University to provide further information if necessary, for verification purposes.

Clinical area in which this work was undertaken………………………………….

Duration of which this work was undertaken………………………………………

Name of confirmer……………………………………………………………………

Signature……………………………………………………………………………...

Date…………………………………………………………………………………….