

CURRENCY OF NURSING PRACTICE

- Hours must be broken down according to the CARNA membership year, which is October 1 to September 30. You may report nursing practice hours from nursing employment anywhere in the world where you were a regulated registered nurse or graduate nurse during the last five years. Do not include vacation, LOA, or sick time. Do **not** send a resume.
- Failure to provide actual hours will delay the application process. If you do not have nursing practice hours for any year and immediate five years prior, please write N/A across the hour's section. (N/A = Not Applicable)

Dates of Employment	Employer Name Province / State / Country	Number of Hours Worked (provide actual hours)
Oct 1, 2005 to Sept 30, 2006		
Oct 1, 2004 to Sept 30, 2005		
Oct 1, 2003 to Sept 30, 2004		
Oct 1, 2002 to Sept 30, 2003		
Oct 1, 2001 to Sept 30, 2002		

The following questions must be answered:

Have you ever been registered, held a RN Permit or Certified Graduate Nurse permit in Alberta? Yes No

Have you been the subject of a disciplinary proceeding instituted against you by a professional nursing organization in another jurisdiction? If "yes" attach the documentation. Yes No

Have you pleaded guilty or been found guilty of a criminal offence for which you have not been pardoned? If "yes" supply documentation. Yes No

Have you developed a physical, mental or emotional condition or disorder or an addiction to alcohol or drugs or other chemicals that impair your ability to provide nursing services in a safe, competent manner? If "yes", attach documentation. Yes No

I have enclosed a photocopy of my birth certificate and one other piece of picture identification showing my complete legal name. Yes

By signing this form, I am hereby authorizing and consenting to the collection, use and disclosure of personal information concerning myself as described in the CARNA Privacy Policy. I certify that the information I have provided on this form is true and acknowledge that my application for registration and my practice permit may be refused or cancelled if I have provided any inaccurate information. I understand that in order to practice nursing in Alberta, I am required by law to be registered or hold a current practice permit with CARNA, before I commence employment.

Signature of Applicant

Date

Your application form will be returned to you if the questions are not answered or the form has not been signed.

Please payment enclosed: Cheque Money Order Visa* Mastercard*

*Credit Card Authorization for Application Fee:

Cardholder Name _____ Card number _____ / _____ / _____ / _____

Expiry Date _____ / _____
month year

Cardholder Signature _____ **\$212.00** Nurses **not** registered in another Canadian jurisdiction
 \$106.00 Reassessment (file inactive for 2 years or more)