

**Application for Assessment  
Registered Nurse (Nurse Practitioner)  
RN(NP)**

Name \_\_\_\_\_

Date of Birth (dd/mm/yyyy) \_\_\_\_\_ SRNA RN Number \_\_\_\_\_

What specialty are you applying for?     Primary Care     Neonatal     Adult     Pediatric

**Formal Nurse Practitioner Education**

Name and Location of Each Nurse Practitioner Program	Language of Instruction	Date Entered y/m	Date Graduated y/m	Credential Received
				<input type="checkbox"/> Diploma <input type="checkbox"/> Masters <input type="checkbox"/> Doctorate <input type="checkbox"/> Re-Entry
				<input type="checkbox"/> Diploma <input type="checkbox"/> Masters <input type="checkbox"/> Doctorate <input type="checkbox"/> Re-Entry

Have you ever been licenced or practised as a RN(NP) or RN(GNP)  Yes     No

If yes, please provide the following information:	Province/Country
Where did you first obtain registration as a RN(NP)?	
Where were you most recently registered and practising as a RN(NP)?	

**RN(NP) Employment History (if applicable)**

(If you have had more than one employer within the dates indicated, fill in the name of your primary employer only, but include the total and clinical RN(NP) hours worked at all employers within those dates.)

Year (do not change dates)	Place of Primary Employment		Total Hours Per Year	Clinical Hours Per Year
	Facility	Location		
2017 Dec 01 – 2018 Nov 30				
2016 Dec 01 – 2017 Nov 30				
2015 Dec 01 – 2016 Nov 30				

I certify that the information I have provided on this form is true and acknowledge that my application for registration and my licence may be refused or cancelled if I have provided any inaccurate information. I understand that, in order to practice as a RN(NP) in Saskatchewan, I am required by law to be registered and hold a current practicing RN(NP) licence with the Saskatchewan Registered Nurses' Association before I commence employment. I hereby agree to review and practice in accordance with the *CNA Code of Ethics for Registered Nurses (2017)*, the *Registered Nurse (Nurse Practitioner) Entry-Level Competencies (ELC)s (2016)* and the *Registered Nurse (Nurse Practitioner) Practice Standards (2016)*.

Signature \_\_\_\_\_ Date \_\_\_\_\_