**Credentialing for Nurses – Employer Statement Template   
(Mental Health Nursing)**

**EMPLOYER STATEMENT**

You are required to provide evidence that you have worked as a registered nurse in a mental health setting for at least 12 weeks FTE over the last 12 months, or 24 weeks FTE in the preceding two years, or 36 weeks FTE in the preceding three years. You can demonstrate this by providing a statement from your employer(s), which states the following:

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| **Name of applicant:**  Click here to enter text. |
| **Specialty area of practice:**  Mental Health Nursing |
| **Organisation name and address details:**  Click here to enter text. |
| **STATEMENT:**  I confirm that Click here to enter text. was employed at Click here to enter text. from Click here to enter a date.to Click here to enter a date.**.** |
| **Title of applicant’s position(s):**  Click here to enter text. |
| **Applicant’s hours of employment:**  Click here to enter text. |
| **Please advise any breaks in employment during this period i.e. unpaid leave:**  Click here to enter text. |
| I confirm that this/these position(s) required mental health nursing knowledge and skill. |
| **Name of person completing declaration:**  Click here to enter text.  **Position of person completing declaration:**  Click here to enter text.  **Phone contact:**  **Email address:**  **Signature:**  **Date:** Click here to enter a date. |