



PROFESSIONAL REFERENCE

TO: _____ **DATE:** _____

FROM: _____

If you are a new graduate forward one form to 2 people (example: your professors.) If you are already practicing as a nurse forward one form to 2 people (example: nurse manager, supervisor, etc.)

I was employed at your institution from _____ to _____ .
y/m/d y/m/d

Would you please complete the following and return to the Nurses Association of New Brunswick. Thank you.

Date Signature

<u>Characteristics</u>	<u>Excellent</u>	<u>Very Good</u>	<u>Average</u>	<u>Fair</u>	<u>Poor</u>
A. Personal Qualities					
1) initiative					
2) motivation					
3) reliability					
4) maturity					
Comments:					
B. Relationship with					
1) peers					
2) clients					
3) professionals					
Comments:					
C. Nursing Potential					
1) ability to organize work					
2) ability to apply knowledge					
3) ability to meet the standards of care					
4) leadership					
5) comprehension of English					

On the basis of past performance, would you employ this nurse should she reapply for a position on your staff?

_____ **Yes** _____ **No** **If no, please elaborate** _____

Comments:

Signature _____ Title _____

Agency _____ Date _____

Address _____ Telephone # _____