Alberta Health Services

Undergraduate Nurse Employee Clinical Hours Confirmation

This form is to be completed by the nursing student. Complete the applicant details and the Clinical Hours Report. Obtain signature from your faculty of nursing to confirm your active enrolment. You must present a current copy of this form at your interviews. For more information visit **http://www.albertahealthservices.ca** or contact your zone Talent Acquisition Advisor. If there is a change in your status, you must notify your employer.

Applicant Details		
Name of student *(Last name, First name)*		Date *(dd-Mon-yyyy)*
Phone	Email	
Name of educational institution	Location of educational institution	☐ Alberta

Clinical Hours Report	
Successful completion of 3rd year of an RN nursing education program **and**	
Completion of 600 hours of clinical practice in an approved RN education program	
Currently in the final year of an after-degree RN nursing education program **and**	
Completion of 600 hours of clinical practice in an approved RN education program	
Successful completion of 2nd year of an RPN nursing education program **and**	
Completion of 600 hours of clinical practice in an approved RPN education program	
Course	**Clinical Hours Successfully Completed**
Total Hours	0

Confirmation of Enrollment

I certify the named student is active and currently enrolled to continue their nursing program in the above named Alberta educational institution.

Name of Educational Institution Representative *(print)*	Signature	Date *(dd-Mon-yyyy)*
Anticipated Graduation Date *(dd-Mon-yyyy)*		

All information is true and accurate. Any changes to the above information will be reported to my employer immediately.

Student Signature	Date *(dd-Mon-yyyy)*