



PEILPNRB

**PRINCE EDWARD ISLAND
LICENSED PRACTICAL NURSES
REGISTRATION BOARD**

PEI LPN REGISTRATION BOARD
155 Belvedere Avenue, Suite 204
Charlottetown, PEI, C1A-2Y9
P: 902-566-1512
E: info@peilpnrb.ca

EMPLOYER VERIFICATION FORM
To be completed by the employer and
mailed directly from the employer to the
PEILPNRB office.

PERSONAL INFORMATION:

First Name: _____

Middle Name: _____

Last Name: _____

Previous Legal Last Name(s): _____

Mailing Address: _____

Email Address _____

Home Phone: _____ Cell Phone: _____

SECTION 2 – Employment in Nursing:

Have you ever been employed in nursing in Canada? YES NO

*If you responded **YES**, please fill out your personal information and authorization, and then send this form to your Canadian employer.

(NOTE: if you are/were employed with more than one employer in the last five (5) years, please send a copy of this form to all Canadian employers.)

*If you responded **NO**, please fill out your personal information and mail this form to the PEILPNRB.

SECTION 3 – Applicant Authorization:

I authorize _____ to complete this form.

Name of Employer

Applicant signature: _____ Date: _____

SECTION 4 –Employer Instructions:

*Please include the following information:

- Employee’s position / area of practice: _____
- Employee’s start date: _____
- Employee’s end date: _____
- If the employee worked: full time part time casual
- How many hours the employee worked per year in the last five years:

| Year | Hours |
|------|-------|
| 2016 | _____ |
| 2015 | _____ |
| 2014 | _____ |
| 2013 | _____ |
| 2012 | _____ |

*Please attach a practical nursing job description AND please fill out the “Employer Contact Information” below.

NOTE: The Employer Verification and job description must be mailed directly to the PEILPNRB.

SECTION 5 – Employer Contact Information:

Name: _____

Position: _____

Facility: _____

Full Mailing Address: _____

Email Address _____

Phone: _____

Please include the reason why the employee left this position: _____

Signature: _____

Date: _____