

THE NURSING COUNCIL OF JAMAICA

Nurses and Midwives Act, 1964
50 Half Way Tree Road, Kingston 5
Telephone (876) 926-6042, 960-0823
Email: nurs@cwjamaica.com

SUMMARY OF CONTINUING EDUCATION ACTIVITIES

FORM 3

1. *Please print or type all information legibly*
2. *Attach all documents verifying continuing education activities*
3. *Submit the original copy of this application*

Name.....

Credentials: (check as appropriate)

RGN

RM

RMN

EAN

Licence Number(s):

RGN

RM.....

RMN.....

EAN.....

Expiry Date of Licence(s) (DD/MM/YY).....

Country.....

