

# THE NURSING COUNCIL OF JAMAICA

Nurses and Midwives Act, 1964  
50 Half Way Tree Road, Kingston 5  
Telephone (876) 926-6042, 960-0823  
Email: info@nursingcouncil.org.jm

## 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.....**

