



Referee Statement Part 2: Master of Nurse Practitioner- Referee Statement (Senior Colleague or Manager Statement)

*To be completed by senior colleague or manager who has worked closely with the applicant for over 12 months and **can confirm the applicant has worked at an advanced level of nursing practice**, as well as describe their capabilities. **This referee cannot be the same person who has completed Referee Statement Part 1.** If there are any questions regarding this form please email nurse.practitioner@curtin.edu.au.*

Applicant Details	
First Name	Surname
Organisation	Position Title

Referee Details	
First Name	Surname
Organisation	Position Title
Relationship to Applicant	Length of Time <i>Worked</i> with Applicant
	Start Month/Year: End Month/Year:
Email Address <input type="checkbox"/> Preferred Contact	Phone <input type="checkbox"/> Preferred Contact

To ensure students are academically and professionally prepared for the rigours of the Master of Nurse Practitioner program, they must demonstrate they have worked at an **advanced level of nursing practice** for a minimum of two years' full time equivalent (FTE) within the previous six years. The demonstration of advanced practice is a critical element required for endorsement as a nurse practitioner by the regulatory authority, the Nursing and Midwifery Board of Australia (NMBA).

The NMBA (2019) defines **advanced practice** as:

*Nurses practising at an advanced practice level incorporate **professional leadership, education, research and support of systems** into their **clinically-based** practice. Their practice includes relevant expertise, critical thinking, complex decision-making, **autonomous practice** and is effective and safe. They work within a generalist or specialist context and they are responsible and accountable in managing people who have complex healthcare requirements. Advanced practice in nursing is demonstrated by a level of practice and not by job title or level of remuneration.*

Please indicate to what extent you feel the applicant's nursing practice reflects the NMBA's regulatory definition of advanced practice:

Not Representative	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	Very Representative
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Please briefly describe why you've used the above rating for the applicant:

Does the applicant demonstrate any other capabilities that indicate an advanced level of practice?

Any additional comments?

Declaration *(please tick):*

- ☐ I declare that all information provided in this document is true and correct.
- ☐ I declare I have worked closely with the applicant for 12 or more months.
- ☐ I understand I may be contacted to verify this information.

Referee Signature	Date
<i>Electronic signatures accepted if this form is sent via email.</i>	