

## EXPERIENCE CERTIFICATE (FOR MSc NURSING APPLICANTS ONLY)

This is to certify that.....has worked in this institution as a staff nurse/Assistant Lecturer/Clinical Instructor from .....to.....This is a ..... bedded hospital/a School of Nursing /College of Nursing with the following specialities/.....admissions for GNM/B.sc Nursing per year.

Specialities in hospital

1.....

4.....

2.....

5.....

3.....

6.....

During his/her stay his/her activities included bed side nursing/supervision of care/clinical teaching supervision/class room teaching/any other (strike off what is not applicable). His/her character and conduct are.....

Date

Signature

Name and Address of Principal/Nursing Superintendent