

PROFESSIONAL EXCELLENCE in NURSING (PEN)

Letter of Intent

Name/Credentials:		Department:	
Years of experience as an RN:		Current hrs/week:	Shift worked:
Years in current specialty:		Highest level of Nursing Education:	
Current ANCC approved certifications:			
Level submitting for:	<input type="checkbox"/> Level I <input type="checkbox"/> Level II		
Topic for outcome submission:			
Intended portfolio submission date:	<input type="checkbox"/> December <input type="checkbox"/> May		
I have reviewed and understand the "PEN" education module on Learning Central.			<input type="checkbox"/> Yes
I have reviewed and understand the "PEN" core requirements for each level.			<input type="checkbox"/> Yes
I have included two letters of recommendation with my letter of intent.			<input type="checkbox"/> Yes

Required Criteria:

- Minimum 1 year RN by submission date
- Direct patient care responsibilities ≥ 50%
- Works a minimum of 0.6 FTE (24 hours/week)
- Meets or exceeds standards of performance
- No written correction action for behavior or performance in the last 12 months prior to application

Manager Signature

Date

***Letter of Intent must be submitted at least 4 months prior to submission date**

(Before August 1st for December submission and February 1st for May submission)

Please send completed letter of intent to Irene Proulx via interoffice or via email @ Irene.Proulx@Tuftsmedicine.org