

LETTER OF SUPPORT (Out-of-Province NRP Instructors)

I am writing this letter on behalf of _____ in support of
(Name of sponsoring institution)

_____ 's request to become a NRP Instructor in BC.
(Name of the applicant)

The applicant meets all of the following eligibility requirements:

- Current registration as a NRP Instructor with CPS.
- Current licensure as an RN, MD, RM, or RT (other health professionals need permission from BC NRP Instructor Trainer Committee).
- Current and relevant experience in neonatal resuscitation.
- Current educational and/or clinical responsibility within the institution.

I am confident that _____ will:
(Name of the applicant)

- Implement NRP programming in our institution in accordance with national and provincial guidelines.
- Mentor and be a resource for NRP Providers/Instructors within our institution and region.
- Demonstrate the requisite knowledge, skills, and confidence to work with members of the inter-professional team.

I acknowledge that institutional support is integral to the success of NRP programming and education, and our institution is committed to providing support for ongoing NRP activities including resources, equipment, space, and/or personnel.

I am aware that participating in a team teach with a NRP Instructor Trainer does not guarantee successful registration in BC as a NRP Instructor. If the applicant cannot demonstrate basic abilities to facilitate learning and evaluate critical neonatal resuscitation the applicant will be deemed unsuccessful.

Date Manager/Department Head Name (print) Title Signature

Email address _____

Signature of applicant _____ Date: _____