Please print this to a letter headed paper

Date

**Professional Credit Award: Clinical Supervision Module**

**School Nursing and Midwifery, University of Galway**

**Name of Candidate**

This letter is to confirm that above named candidate will be supported to undertake the ‘Clinical Supervision: Supporting Professional Development Module’ at the School of Nursing and Midwifery, University of Galway.

In addition, the above staff member will be supported in the application to deliver and receive ‘six hours’ of one-to one or peer group clinical supervision in the practice area during the duration of the module.

Yours sincerely,

Signature of Director of Nursing or Senior Manager

Contact details