

PROFESSIONAL EXCELLENCE in NURSING (PEN)

Letter of Recommendation Director/Manager/RN Nursing Peer Form

The Direct Patient Care Nurse *Professional Excellence in Nursing* (PEN) applicant is recognized for promoting clinical excellence and exemplifying the Lowell General Hospital standards of performance.

Part of the application process requires that applicants submit two (2) letters of recommendation with PEN letter of intent; one (1) from his/her current manager/director, and one (1) from an RN nursing peer familiar with the applicant's clinical practice over the past year. Instructions: Please complete this form and return it to the PEN applicant before _____ (date). The form must be legible. Letters should be legible, be brief, and indicate the nature and dates of your association. All letters must be dated within 12 months of the PEN application deadline and submission date (100 words or less). Please use additional pages if needed or replicate this format in a separate document. Applicant's Name: Your Name: Your Relationship to Applicant: Please briefly describe your observations of applicants' clinical practice and modeling of standards of performance over the last year. Date of Recommendation:

Signature of Person Recommending: ___