

Nursing Home Administrator in Training or Verification of Employment in Long Term Care

Administrator in Training (to be filled out by the preceptor)

- I attest that I have been a licensed nursing home administrator for at least two years, am in good standing and am not related to the practicum student.
- I attest that I have completed a preceptor course and provided that verification to the Board office.
- In accordance with the above referenced requirements, the licensure applicant _____
_____ has completed an administrator in training program.
- The curriculum completed was through _____

Completed by: _____ NHA License number: _____

Facility/Company: _____

Address: _____ City/State/Zip code: _____

Signature

Date

Verification of Employment in Long Term Care (to be filled out by the agency designee)

Completed by: _____ Applicant: _____

Facility/Company: _____

Address: _____

City/State/Zip code: _____

Applicant's employment history with this company/facility

Dates of Employment	Facility Name	Position(s) held

Signature: _____

Date: _____