



Employee ID: _____

Georgia Board of Nursing

Continuing Competence – Evidence of Active Nursing Practice For Use By Registered Nurses Only

O.C.G.A. § 43-26-9(b.1)(4) provides that applicants for licensure renewal as a registered nurse may submit verification of competency by a health care facility or entity licensed under O.C.G.A. §31-7 or by a physician's office that is part of a health system. The licensee must have practiced at least five hundred (500) hours during the biennial renewal period and the employer must complete the certification form below.

Name	License Number
I certify that the above licensee has worked at least five hundred (500) hours during the period of _____ (MMYY) through _____ (MMYY) and has performed his/her duties competently.	
As the employer/employer representative, I verify that the facility or entity is licensed under O.C.G.A. §31-7 or is a physician's office that is part of a health system.	
Employer/Representative Name	Date
Employer/Representative Signature	Title
Name of Company <i>Augusta University</i>	
Telephone <i>(706) 721-3631</i>	Email <i>AU_HR_RECORDS@AUGUSTA.EDU</i>

You may also find it helpful to use this link (<http://dch.georgia.gov/gamap2care%C2%AE-find-facility>) to visit the website for the Georgia Department of Community Health. At that site, use the "Find a Facility" search tool to search for licensed health care related facilities licensed by that agency. If your facility is not licensed under O.C.G.A. § 31-7 and is not included on that site, you may not use Option Four to satisfy the continuing competency requirements.

Employees of the Georgia Department of Public Health may use this form to satisfy Option Four of the continuing competency requirements.

For licensees completing the license renewal process, this form should be submitted to CE Broker (www.cebroke.com) using the instructions contained on the Board's website (www.sos.ga.gov/plb/nursing).