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Uganda Nurses and Midwives Council Ministry of Health P.O. Box 4046 Kampala

## **RECOMMENDATION LETTER FOR OPENING A NURSE OR**

## **MIDWIFE HEALTH UNIT**

The person named below is applying to open a nurse or midwife health unit with the Uganda Nurses and Midwives Council and has been asked to pass a copy of this form to each referee. We shall be most grateful if you would be kind enough to send the form duly completed.

Kindly return the form within  $\underline{14 \ days}$  of the application. Please accept our sincere thanks in advance

SECTION A: (To be filled by the A)	pplicant)								
Full name of Applicant:	_								
Type of Health Unit applied for:									
Name of recommender/referee:	_								
SECTION B: (To be filled by the Re		-							
Please write honestly about the applicant. You may use the other side of this form or attach a letter to this form. Indicate how long and in what capacity you have known the applicant. Comment on the applicant's professional qualifications and potential for operating a nurse or midwife health unit. In describing such attributes as professionalism, technical knowledge, technical skills, and leadership and management, comment on both the strong and weak points.									
1. I									
2. In my opinion the applicant's professional qualifications and operating a nurse or midwife health unit is: (tick as applicable)									
<ul> <li>Excellent</li> <li>Very good</li> <li>Good</li> <li>Fair</li> <li>Poor</li> </ul>									
3. How do you rate the applicant on the following attributes?									
Attributes	Below 50%	50 – 59%	60 - 79%	80% & above					

a) Matamita							
a) Maturity							
b) Professionalism & general							
conduct							
c) Technical knowledge							
d) Technical skill							
e) Work performance							
f) Motivation for private							
practice							
g) Ability to manage and lead							
others							
h) Time keeping							
i) Attitude towards work							
j) Relationships with colleagues							
k) Relationships with customers							
<ul><li>4. So you recommend this applicant for private practice?</li><li>Briefly explain why?</li></ul>		<ul> <li>Highly recommend</li> <li>Recommend</li> <li>Recommend with reservation</li> <li>Do not recommend</li> </ul>					
5. Name:							
6. Postal Address:							
7. Tel No.:							
8. Email address:							
9. Position:							
10. Signature:		Date:					