

Request for Letter of Standing and Professional Conduct

Authorization and Consent for the Release of Information

I hereby request that the BC College of Nurses and Midwives (BCCNM) release a *Letter of Standing and Professional Conduct* to the organization named below. I authorize BCCNM to disclose in the *Letter of Standing* information about my professional conduct, including information about my professional conduct that may not be generally available to the public.¹

Name of registrant: _____ Date: _____

Please send the Letter of Standing and Professional Conduct to:

Name of organization: _____

Mailing address: _____

Telephone: _____ Fax: _____ Email: _____

Payment (please select one of the following)

I will pay the \$60.00 fee for a *Letter of Standing and Professional Conduct*:

Online by credit card through my account on the BCCNM website; or

By attaching or sending a cheque.

¹ BCCNM does not provide information about investigations or proceedings that are in process and not yet resolved. However, based on this consent, BCCNM will state in the *Letter of Standing and Professional Conduct* that a matter is under investigation or in process.