



Graduate Nurse Placement Letter of Good Standing

This form must be sign by all necessary parties and uploaded onto the online TMC Graduate Nurse Placement Application.

The following employee is confirmed to be have not had **any** corrective action (written warning and above) in the last year including the corporate attendance policy. Additionally, I confirm that the information provided by the employee is factual to the best of my knowledge.

Applicant Signature: _____

Date: _____

Director Approval: _____

Date: _____

