Documentation of Completion of Monitored Hours

APRN Printed Name	APRN License Number
APRN Track	
Designate work hours as an RN bef	ore graduation from the APRN program:
Original RN license date	
Work hours < 1 year or 2000 ho	ours need 2000 monitored hours
Work hours > 1 year or 2000 h	ours need 1000 monitored hours
Keep your verification letter from	m your work facility on file at your practice site
Clinical hours completed in your AF	PRN program
hours	
Keep your verification letter from	m your school on file at your practice site
Clinical hours completed post APR	N graduation and national certification
hours	
Keep a detailed calendar as to practice site.	the days/hours/qualified provider on file at your
We verify the completed number of cli completion of the Board of Nursing red	nical hours and attest to the accuracy of the quired monitored hours.
APRN Signature	Date
Collaborating Physician SIgnature	Date

Please upload this completed summary document along with the proof of work hours as an RN, proof of clinical hours in APRN school, and proof of clinical hours post national certification to the BON gateway portal.

Important: The APRN cannot work without a qualified provider (see Admin Code 2840, Rule 1.3) on site, at any practice site, until the monitored hours are fully completed.

The Mississippi Board of Nursing has no purview over the APRN receiving monetary compensation during this time. Monetary compensation is at the discretion of the facility.