

INSTRUCTIONS

Provide a detailed description of how this employer meets any or all of the following criteria. Please use specific examples. You may attach up to 10 pages of supporting documentation.

A. Sustained support of the OCN[®]-, CPON[®]-, CPHON[®]-, AOCN[®]-, AOCNP[®]-, AOCNS[®]-, CBCN[®]-, or BMTCN[®]-certified nurse role.

1. Describe how the organization indicates a preference/requirement for certified nurses in job descriptions or advertisements.

2. Describe how the organization provides financial support for certification examinations, renewal, and/or examination preparation.

3. Describe how the organization provides recognition of nurses who attain certification.

Nominations must be received at ONCCNominations@oncc.org

Please contact:

ONCC

125 Enterprise Drive

Pittsburgh, PA 15275-1214

Fax: 412-859-6167

Phone: 877-769-6622 (toll free)

Email: ONCCNominations@oncc.org