



Your Letter of Intent must follow this template letter exactly (please print clearly). E-mail applications will be accepted. Please email to [admin@midwives.mb.ca](mailto:admin@midwives.mb.ca). The next application deadline is May 13, 2015.

LETTER OF INTENT

I, \_\_\_\_\_ (print first and last name) am applying to participate in the 2015-16 Manitoba Internationally Educated Midwife (IEM) Assessment and Gap Training Process Pilot Project.

Midwifery Education:

1. Name and location of my university, college, school or institution:

\_\_\_\_\_ (name of school), \_\_\_\_\_ (city), \_\_\_\_\_ (country)

2. Length of my midwifery education program: \_\_\_\_\_ (years).

Clinical Experience:

3. Total Number of births I attended as primary midwife (most responsible attendant): \_\_\_\_\_. (Births attended as primary midwife under supervision as part of a midwifery education program may be included. Transfers of care may be included if the applicant managed care in labour to point of transfer.)

4. Length of time I practiced (worked) as a midwife: \_\_\_\_\_ (months/ years).

5. Location and date that I last practiced as a midwife:

\_\_\_\_\_ (City, Country), \_\_\_\_\_ (month/year)

Language:

6. The language in which I am most comfortable communication is \_\_\_\_\_ (language).

7. My midwifery education program was in \_\_\_\_\_ (language).

Residency:

8. I am a (please check one):

- Canadian citizen  Permanent resident  Other (provide explanation)

9. I have lived in Manitoba since \_\_\_\_\_ (date).

I understand that making any false or misleading statements in this Application and Letter of Intent may disqualify me from the Manitoba IEM Assessment and Gap Training Process.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Email Address: \_\_\_\_\_ Phone number: \_\_\_\_\_

Mailing Address: \_\_\_\_\_