



**Nursing and  
Midwifery Board  
Ahpra**

This is to certify that

**Worker Name**

Is a registered

**Nurse**

**Registered Nurse (Division 1)**  
with General Registration  
number: XXXXXXXXXX

**Notations**

Nil

**Conditions**

Nil

**Undertakings**

Nil

**Reprimands**

Nil

**Registration requirements**

Nil

**Registration expiry: XX/XX/XX**