

Professional Statement of Support for OSW-C Certification

Applicant Information:

Applicants need 3 total copies of this form: one for your direct supervisor and two for current professional oncology colleagues who directly work with you in your current institution/agency (MSW, MD, RN, PT, etc.) *Former and present students or supervisees are excluded from completing this letter of support.*

Professional Reference:

You have been selected to complete the following statement of support for an oncology social worker applying for certification by the Board of Oncology Social Work Certification. The information you provide on this form will help establish the applicant's eligibility for the OSW-C certification. Thus providing specific and accurate information is very important. Thank you for your contribution to maintaining high professional standards in the oncology social work profession. **This statement of support will be kept confidential.**

Applicant's Name _____

Applicant's Employer _____

Employer's Address _____

Individual Completing Statement _____

Degree: MSW ___ RN ___ MD/DO ___ Other (please describe) _____

Contact Phone Number _____

Email _____

Relationship to Applicant (check one): _____ Immediate Supervisor
_____ Professional Colleague

6. I recommend
 I do not recommend

_____ (Applicant's name) for oncology social work certification.
I understand I may be contacted to validate the above information.

Signature: _____ Date: _____

To provide confidentiality and to promote objective feedback, please return the form in an envelope with your signature over the sealed flap to the applicant as soon as possible.