



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.

LETTER OF INTENT

I, _____ (print first and last name) am applying to participate in the Assessment and Gap Training process as an Internationally Educated Midwife (IEM).

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) and date of graduation _____ (mm/yy).

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 IEM Assessment and Gap Training Process.

Signature: _____

Date: _____

Email Address: _____
(please print clearly)

Phone number: _____

Mailing Address: _____