



Enrolled Nurse - Instructions for Renewal of Registration / License

Please read these instructions before completing the application for Renewal of Registration / License

Enrolled Nurses are required by law, Nursing and Midwifery Act 1997, to renew their registration/license every two years. Renewal period is from September 1 – October 31 of the year in which the registration/license expires. Back and late fees will be levied on lapsed and late registrations.

1. Please complete all sections of the form before submission. Incomplete applications will not be processed.
2. An application form is available from the Nursing and Midwifery Council office or can be downloaded from the Bermuda Nursing and Midwifery Council (BNMC) website at www.bnc.bm.
3. The Applicant is required to have a current unencumbered license.
4. Applicants must have been engaged in the practice of nursing for a period of not less than 100 hours during the past 12 (twelve) months. Applicants who are not employed in Bermuda must provide evidence of hours worked by way of certified letter from the employer or supervisor.
5. Applicants who have not worked a minimum of **100 hours** within the past twelve months may appeal for re-registration by writing a letter addressed to the **Credentials Committee** of the Bermuda Nursing and Midwifery Council explaining their circumstance.
6. Evidence of continuing education is essential and must accompany the application form including proof of attendance, i.e. Certificate of Attendance. Where a certificate is not available, proof of attendance should include date, duration, and CE hours awarded and signed by course provider. A **BNMC Continuing Education Form** should be used to itemize activities for consideration and affixed to the application form prior to submission.

7. In compliance with the Nursing and Midwifery Rules 2010, it is mandatory that Enrolled Nurses, complete [24 \(twenty four\) hours of continuing education within the two years preceding time of registration.](#)

Acceptable Continuing Education:

- Online nursing courses/CME/College Courses, related to:
 - Direct/Indirect nursing care
 - Physical, social behavioral sciences
 - Continuing education related to pursuit of RN, or other certification Health-Related fields
 - Leadership Development
 - Printed material (book, chapter, Journal article) related to Nursing or Health Care.
 - There must be proof of completion of activity with certificate verifying completion through test, or other evaluative means. Title of printed material, source, date of completion of activity should be included.
 - Attendance in Nursing or health-related conferences with approved CE's by reputable credentialing body. (Please check with course Provider or BNMC).
 - Authorship of publications, abstracts and presentations related to Nursing or health-related topic.
 - CPR *cannot* be used as CE hours.
8. Evidence of current CPR must be attached to your application.

9. Re-Registration fee is **\$90.00** (subject to change). Payment must accompany the application and must be in Bermuda or U.S. currency. When made in person, Bermuda bank cheque payable to the **Accountant General** or cash is accepted. For overseas applicants, U.S. Bank draft/cashier's cheque is acceptable. All Cheques and Bank Drafts must be payable to the **ACCOUNTANT GENERAL**. Debit/Credit card payment or Money grams are not accepted.
10. Applications received after the deadline will be deemed to be in arrears and a **late fee** of \$45.00 (subject to change) will be applied.
11. Applicants whose registration have lapsed less than 8 years, fees will be back dated and a late fee will be applied.
12. Applicants whose Bermuda registration have lapsed for 8 years or more are not eligible to re-register.
13. When applicable, a copy of documents supporting a name change must be attached to the application form.
14. If you answered **"YES"** to questions # 1-3 on [the application form](#), please provide a written explanation, including any resolutions as applicable and attach. If this matter has already been reported to BNMC, do not attach.
15. If you answered **'YES'** to question # 4 [on the renewal application form](#), please provide evidence of your attendance at rehabilitation.