



2025 Fellowship Statement of Support

Participation in either the AONL Nurse Manager Fellowship, Nurse Director Fellowship, or Nurse Executive Fellowship requires a commitment of time and resources. To confirm that the organization is in support of the applicant's full participation, we ask that this form is completed by the Chief Nurse Executive or equivalent. The applicant will include this completed form as part of the final application packet.

- 1) Please enter the applicant's name: _____
- 2) Is your organization prepared to support the time and resources required to complete all Fellowship sessions and the capstone project? (Time commitment: time away from work to participate in all sessions and time to work on the capstone project; Resources: supporting project completion, providing payment of Fellowship tuition and participant's travel expenses)

Yes

No

- 3) If you are unable to support the applicant, please explain.

- 4) Is there anything you would like to share with us about the applicant?

Contact Information for Chief Nurse Executive or Equivalent

Name _____
Title _____
Phone _____
Email _____

If you have questions related to this form, please contact the following:

For Nurse Manager and Director Fellowship:

Elaine Perkins, MS, RN
Education Director, AONL
eperkins@aha.org

For Nurse Executive Fellowship:

Amy Trueblood, MS, RN, NEA-BC
Senior Director, AONL Leadership Development
atrueblood@aha.org