

[Your Full Name, RN/CPN]

[Street Address]

[City, State, Zip Code]

[Phone Number]

[Email Address]

[Date]

[Recipient Name]

[Title/Hiring Manager]

[Hospital/Facility Name]

[Department Name]

[Street Address]

[City, State, Zip Code]

RE: Professional Referral for [Candidate Name]

Dear [Recipient Name],

It is my distinct pleasure to recommend [Candidate Name] for the position of Pediatric Registered Nurse at [Hospital/Facility Name]. Having worked closely with [Candidate Name] for [Number] years at [Current/Former Institution], I have witnessed firsthand their exceptional clinical competence and dedication to pediatric patient care.

[Candidate Name] possesses a unique ability to connect with pediatric patients and their families during high-stress situations. Their technical skills in [mention specific skills, e.g., pediatric IV starts, neonatal monitoring, or oncology care] are matched by a deep sense of empathy and patience. They consistently demonstrate the clinical judgment necessary to manage complex cases while maintaining a child-friendly environment.

Beyond clinical excellence, [Candidate Name] is a collaborative team member who contributes positively to unit morale and interdisciplinary communication. They have played a key role in [mention a specific project or achievement, e.g., improving discharge education protocols or mentoring new staff].

I am confident that [Candidate Name] would be a valuable asset to your pediatric nursing team. Please feel free to contact me at [Phone Number] or [Email] should you require any further information regarding their qualifications.

Sincerely,

[Signature]

[Your Printed Name and Credentials]