

UNIVERSITY OF LOUISVILLE  
SCHOOL OF NURSING  
NURSING 506  
**Leadership/EBP/Policy Practicum**

**LEADERSHIP HANDBOOK FOR PRECEPTORS**  
Spring 2021

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University of Louisville  
School of Nursing

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**Dear Preceptor,**

Thank you for your participation in the leadership preceptorship experience for the University of Louisville, School of Nursing. As course coordinator, I am very excited about this opportunity that will allow students to have an intensive, precepted leadership experience. The guidelines in this document outline our agreements in this collaborative effort and provide information for you about the expected student behavior as they progress through this experience. The responsibilities of each party involved in the student learning experience are outlined on the following pages. The expectations of students in the setting are also listed for you.

**The student will keep a “leadership log” of their time with you each day. You are required to sign that log at the end of each shift. It is important that the preceptor only sign the “leadership log” after checking that the hours listed are accurate. PLEASE DO NOT SIGN LOGS FOR PRIOR SHIFTS. You may be unwittingly “endorsing” hours that the student did not actually earn.**

The log must be signed daily and treated as a legal “time card” for the student. Students must not alter the leadership log without your initialing the change. You will advance student’s activities (and number of patients assigned) as the student demonstrates competency and the ability to progress with more responsibilities.

Each student has a clinical faculty who will maintain close communication with the student and with you. The clinical faculty will arrange orientation of students to the agency and will orient you to your role as preceptor. Your perception of student performance is essential in assessing the student’s progress toward the terminal objectives of the leadership experience. **The clinical faculty and you, the preceptor will exchange phone numbers and email addresses to insure that close communication** can be maintained throughout the leadership experience. The clinical faculty may visit the clinical site and/or conduct phone interviews or exchange email messages with you to evaluate the student’s progression.

**We trust that your judgment regarding the student’s performance is based on your expertise as a practicing registered nurse leader. Therefore, we want you to know that we value your assessment of the student’s performance and highly encourage you to contact us at the first indication that there may be concerns with the student’s leadership performance and/or professional behaviors.** You do not need to limit your phone calls to “business hours” and may call anytime. We understand that you may want to call after you leave your workplace so that you may talk privately and openly with the faculty.

If there are concerns about the student’s performance, additional communication may be needed. The faculty may choose to follow the student for a number of hours to directly observe the student in the leadership setting. This may be initiated by faculty concerns or the request of the leadership preceptor.

You can assist the student integrate knowledge from the classroom while learning leadership skills by helping the student focus on the aspects of quality improvement, evidence-based practice or policy evaluation. **Please review this document carefully prior to the beginning of the leadership experience. We want you to feel free to contact the student’s clinical faculty or the Course Coordinator for any concerns or questions about your role. My contact info is listed below. The clinical faculty for your student will share his/her contact information with you as well.**

**Thank you!**

Sarah Carter, MSN, APRN, FNP-BC (Coordinator)

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Email: [sjgnia01@louisville.edu](mailto:sjgnia01@louisville.edu)

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**UNIVERSITY OF LOUISVILLE SCHOOL OF NURSING  
N506: CAPSTONE LEADERSHIP PRACTICUM**

**GUIDELINES FOR PRECEPTORSHIP EXPERIENCE**

**The University of Louisville School of Nursing Agrees:**

1. To offer an approved curriculum for undergraduate students that meets accepted national accreditation standards.
2. To be responsible for planning with the preceptor and agency administration experiences that facilitate meeting the learning needs of the student.
3. To require students to have current professional liability insurance.
4. To require students to carry health insurance.
5. To require students be currently certified in CPR.
6. To require students be current with all required immunizations and TB testing.
7. To require students to obtain final approval for additional learning objectives. Final approval will rest with the designated preceptor and the student's faculty advisor.

**The Agency Agrees:**

1. To provide opportunity for nursing care in a selected setting.
2. To allow students the opportunity to assume leadership roles learning experience within the confines of the practice setting.
3. To allow students to develop additional learning objectives for the leadership experience in collaboration with preceptor and faculty within the parameters of the agency.
4. To allow students the freedom to independently and/or collaboratively apply the skills of assessing, planning, implementing and evaluating their own nursing care.
5. To utilize in collaboration with the School of Nursing the following criteria in selecting a student preceptor.

**The Preceptor must:**

Required qualifications:

1. Hold a current unencumbered license as a registered nurse in the state where the clinical site is located.
2. Show evidence of clinical competencies related to clinical teaching.
3. Hold a minimum of BSN, with MSN preferred.
4. Have at least 1.5 years of experience as a Registered Nurse

Additional qualifications:

1. Exhibit expertise in the field of preparation.
2. Have a committed belief in the expanded role of the professional nurse.
3. Be willing to serve as a preceptor.
4. Be willing to assume responsibility for making student assignments for independent practice with careful attention given to the scope of the individual's knowledge and skills.
5. Be willing for the student to pursue individual learning objectives within the parameters of the agency.
6. Share phone numbers and email addresses with the faculty for the purpose of ongoing communication regarding evaluation of student performance.
7. Work a minimum of 24-36 hours each week engaged in direct patient care.

**The Preceptor Agrees:**

1. To provide opportunity for the student to pursue learning objectives within the parameters of the agency and in accord with the nursing role assumed by the preceptor, and aligned with the program mission, goals and outcomes as described below on page 4..
2. To allow the student the freedom to independently and/or collaboratively apply leadership skills the setting.
3. To provide opportunities for the student to assume a leadership role as a learning experience within the confines of the practice setting.
4. To serve as a resource person, consultant and supervisor for the student's leadership nursing experience.
5. To be willing to assume responsibility for making student assignments for nursing leadership practice with careful attention given to the scope of the student's knowledge and skills.
6. To provide daily verbal feedback to student on performance.
7. To share contact information in order to communicate with the faculty on an on-going basis (email, telephone, face-to-face)
8. To initiate communication with faculty immediately regarding concerns about student performance and to discuss any needed actions.
9. To provide input into clinical evaluation of student performance as described in Clinical Evaluations Section.

**The Student Agrees:**

1. To establish any additional learning objectives for the leadership experience in collaboration with the clinical instructor and leadership preceptor. These objectives must be written and in measurable behavioral terms.
2. To negotiate with the preceptor for experiences that will facilitate meeting personal learning objectives and assist in the development of professional competencies.
3. To maintain pristine communication with the clinical faculty and the preceptor through email, phone calls or personal meetings.
4. To have current professional liability insurance, immunizations (including TB testing) and CPR certification.
5. To have current health insurance, and to assume the cost of any health care services not covered by insurance.

**The Clinical Faculty Agrees:**

1. To orient students and preceptors to the leadership experience.
2. To arrange for student orientation to the assigned agency and to facilitate student access to the agency.
3. To establish a mechanism for maintaining contact with preceptors during the period of preceptorship. Examples of mechanisms: electronic mail, telephone contact, on-site visits and/or discussions.
4. To provide a midrotation and final written clinical evaluation to students.

\*Preceptorship Guidelines based closely upon those used by the University of Alabama School of Nursing for NUR 458. Used by permission of UAB School of Nursing.

The University of Louisville School of Nursing Mission statement is: To role model professional excellence and to educate professional nurses who are prepared to achieve distinction in: 1) leadership, 2) innovation, 3) practice, 4) research/scholarship, 5) engagement, and 6) service to meet the evolving health needs of a diverse society.

The MSN goals include:

1. Prepare nurse leaders to incorporate core scientific and ethical principles in the provision of nursing care.
2. Prepare nurse leaders to translate and integrate evidence into practice through application of theory and research.
3. Prepare nurse leaders to collaborate and lead interprofessional teams to promote safe and effective culturally relevant care to individuals and groups.
4. Prepare nurse leaders to act as change agents to achieve optimal health outcomes through quality improvement and changes in health care policy across populations.

The MEPN MSN program outcomes include:

1. Demonstrate moral, ethical and legal behavior in the advanced nursing role.
2. Apply knowledge and leadership skills in the provision of quality advanced nursing care.
3. Synthesize current evidence to plan and provide advanced nursing care.
4. Use effective communication strategies with individuals, families, and groups in providing advanced nursing care.
5. Develop, participate on, and/or lead inter-professional teams to improve patient and population health outcomes.
6. Demonstrate critical thinking in advanced nursing care of individuals, families, groups, and communities.
7. Analyze the role of health policy and advocacy in the provision of health care.

**EXPECTED STUDENT BEHAVIORS DURING THE PRACTICUM EXPERIENCE**

**I. Clinical Week:** The clinical week is **SUNDAY** through **SATURDAY**.

**II. Student Availability:** Students must be available for clinical all days of the week Sunday through Saturday.

**III. Attendance / Minimum Hours Requirement:**

- The student must attend leadership clinical at their assigned facility a ***minimum of 64 hours total***. While there are no minimum hours required weekly, students will need to complete 64 hours total within the semester.

**IV. Weekends:** Students will be required to attend clinical on weekends if necessary to achieve the minimum required hours.

**V. Maximum Hours Limit:**

- **Students are not permitted to attend leadership clinical in excess of 40 hours per week.**
- Leadership hours reported exceeding 40 hours per week will be forfeited.

**VI. Scheduled course activities:**

- Class time including face-to-face sessions take priority over scheduled clinical leadership hours.
- Students are not permitted to schedule professional activities in conflict with class time or other scheduled course activity.
- **Violation of this will result in forfeit of the leadership hours and the student will be formally counseled.**

**VII. Personal activities:**

- Personal activities (weddings, showers, vacations, doctor/dentist appointments, out-of-town trips, job interviews etc.) must be arranged so they do not interfere with the expected leadership requirements and other required clinical and classroom activities.
- Students are expected not to schedule outside work in conflict with class or leadership time.
- Students who have an important personal event occurring during the semester should consult with their clinical faculty as far in advance as possible to arrange a way in which both personal needs and academic requirements can be met.

**VIII. Schedules:**

- Clinical faculty are responsible for students and therefore must know at all times when the student is in the clinical area.
- Students are responsible for submitting their clinical schedule to their Clinical faculty at least one week ahead of their schedule.
- No changes are to be made in the submitted leadership schedule without the permission of the Clinical Faculty.
- Failure to notify the Clinical Faculty of schedule changes, missing clinical time (full day or partial day), or adding hours to the schedule without the faculty's permission will be considered failure to communicate and meet professional standards and will result in formal disciplinary action.
- This may also be construed as academic dishonesty and may result in disciplinary action and failure of the clinical experience.
- Clinical hours reported to the faculty for which the faculty did not receive a previous schedule will be forfeited. It is the student's responsibility to submit the schedule on time.

**IX. Safe Practice:**

- If at any time, a student is deemed unsafe or unprepared for leadership clinical, the student may be dismissed from or prohibited from attending.
- Whether or not the student is allowed to return to the area is solely the judgment of the clinical faculty and course coordinator.

**X. Completion of Clinical Hours:**

- All 64 leadership hours must be completed by the date indicated on the syllabus calendar (within the semester).

**XII. Clinical Evaluations:**

- Preceptors will be oriented to the preceptor role by clinical faculty prior to the start of clinical.
- Preceptors will evaluate students during each shift and provide feedback to the student regarding leadership objectives.
- Students will have a midrotation and final leadership evaluation with the clinical faculty.
- **Input will be sought from the preceptor.** The preceptor is welcomed to submit input to the clinical faculty on the student evaluation form, however there is no requirement for the preceptor to complete an evaluation in writing.
- **Input will be given to the faculty during site visits and/or through phone or email conversations.**

### **XIII. Compliance with UofL SON and Clinical Site Policies:**

- The student will comply with all policies and procedures of the clinical facility, including the SON clinical DRESS CODE.
- The students will wear their U of L student nametag and picture ID badge when in clinical at all times.
- If leadership site policies are more rigorous than SON policies the student will abide by the leadership site policies.

### **XIV. Alternate Preceptors:**

- **No other staff member may serve as the student's preceptor other than the formally assigned preceptor** without prior arrangements by the clinical faculty.
  - In this case the staff member must meet the qualifications for serving as a preceptor, agrees to do so, and has approval from her/his nurse manager.
- Any hours accrued with an "alternate" preceptor that was not pre-approved by the clinical instructor will be forfeited.

## **STUDENT LEADERSHIP PROJECT GUIDELINES**

### **Nursing Leadership, Evidence-Based Practice, & Policy Practicum Project Identification, Development, and Dissemination- GUIDELINES**

#### **1. Assessment and Project Identification:**

- **Assess:** Students will conduct an assessment at N506 leadership practicum placement, including the population involved, assessment methods, & results.
- **Identify:** Students will identify a nursing leadership, evidence-based practice, and/or policy problem to improve systems specific to their N506 leadership practicum setting and obtain approval from their site preceptor and faculty.
- **Develop:** Students will develop a PICO question describing their clinical problem specific to their N506 leadership practicum setting.

#### **2. Project Development and Implementation:**

- **Research:** Students conduct research specific to the clinical question.
- **Analyze and apply:** Students develop project specific to their N506 leadership practicum setting.
- **Project Implementation and Dissemination (Presentation phase I):** Students will disseminate outcomes of their research and development to interprofessional team members in their N506 leadership practicum setting.
- **Appraise:** Students will receive feedback from interprofessional team members about their project presentation.

#### **3. Project Evaluation:**

- **Interpret:** Critique implementation and dissemination of project.
- **Analyze and apply (Presentation phase II):** Develop presentation incorporating project outcomes and evaluation including future recommendations for peers and faculty. Record and post using Panopto. Post powerpoint slides for review by peers and course faculty in Blackboard.
- **Critique:** Students will evaluate student/peer powerpoint presentations and submit evaluation forms via Blackboard.

## **END OF LEADERSHIP EXPERIENCE EVALUATIONS**

At the end of the semester we will ask you to complete an evaluation of your experience serving as a preceptor.

The student's clinical evaluation is attached below. We ask that preceptors please review this so they will be familiar with the expected performance exemplars for the student. Preceptors may fill out the form if they desire and submit this to the clinical instructor. We very much want the preceptor's input as to the particulars of the student's performance, but preceptors are not obligated to complete this form.

NURS506 Preceptor Handbook Acknowledgement (may be completed online)

I have received a copy of the University of Louisville NURS 506 Preceptor Handbook. My signature indicates my agreement to precept and my understanding of the information included in this handbook, which includes:

- An overview of the course
- MEPN program outcomes
- Student learning objectives
- Clinical evaluation methods
- Role expectations of clinical faculty, clinical preceptor, and student

I am a BSN prepared nurse (circle one)      YES                      NO

Preceptor printed name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Appendix A

*Your input is vital to the student's formative midrotation assessment and the final summative leadership evaluation. Please look over the criteria on the student evaluation below. Feel free to jot down on this form any areas in which the student excels or areas that may need some improvement. You are not required to complete the form rather it is a tool that can help guide you when you discuss the student's performance with the clinical faculty.*

**University of Louisville School of Nursing  
N506 Leadership/EBP/Policy Practicum Clinical Evaluation**

Student: \_\_\_\_\_ Instructor: \_\_\_\_\_ Semester: \_\_\_\_\_  
Clinical Site: \_\_\_\_\_ Preceptor: \_\_\_\_\_

**Any unsatisfactory evaluation for any objective at the Mid-Rotation Evaluation requires a comment detailing evidence, expectation and a plan for improvement. Any unsatisfactory evaluation for any objective at the Final Evaluation will result in failure of N506.**

**Program Outcomes:**

1. Demonstrate moral, ethical and legal behavior in the advanced nursing role.
2. Apply knowledge and leadership skills in the provision of quality advanced nursing care.
3. Demonstrate critical thinking in advanced nursing care of individuals, families, groups, and communities.
4. Synthesize current evidence to plan and provide advanced nursing care.
5. Use effective communication strategies with individuals, families, and groups in providing advanced nursing care.
6. Develop, participate on, and/or lead inter-professional teams to improve patient and population health outcomes.
7. Analyze the role of health policy and advocacy in the provision of health care.

US= Unsatisfactory S= Satisfactory

OBJECTIVES	MID-ROTATION		FINAL	
	US	S	US	S
<b>COMMUNICATION</b>				
1. Demonstrates ability to communicate effectively with staff, clients, peers, and instructor verbally and nonverbally.				
2. Engages with shared leadership team in a professional manner.				
3. Documents nursing assessment and interventions appropriately using clear, accurate, and concise terminology.				
4. Identifies and reports findings to preceptor or appropriate personnel.				
5. Provides for continuity of care of clients including physical, psychological, spiritual, and emotional needs/concerns, via charting, client care conferences and/or collaboration with interdisciplinary members and leaders of the health team.				
6. Serves as an advocate for healthcare needs of the clients, unit staff, or agency.				
<b>ASSESSMENT</b>				
1. Conducts a comprehensive assessment (including health systems, policies, evidence based practices, and culture) of assigned unit.				
2. Assesses the educational needs of the unit.				
3. Performs assessment of unit leadership topics in an organized manner and in an appropriate time frame.				
4. Collects essential data (including current practices, historical aspects, safety plans, quality improvement interventions, etc.) about the unit in a systematic and continuous fashion.				
*5. Uses critical thinking to analyze these data and identify and prioritize nursing leadership priorities.				
<b>PLANNING &amp; INTERVENTION</b>				



1. Uses the nursing process to plan and prioritize nursing interventions for the unit: A. Establishes specific, realistic, measurable and relevant short and long-term goals with unit leadership. B. Selects appropriate interventions to meet identified goals. C. Identifies appropriate theoretical rationale for interventions. D. Establishes a comprehensive leadership plan congruent with the interprofessional health team goals and objectives.				
<b>PLANNING &amp; INTERVENTION (Continued)</b>	US	S	US	S
2. Implements a leadership, evidenced-based or policy plan for assigned unit using appropriate interventions to meet identified goals.				
3. Establishes a therapeutic relationship that demonstrates respect for unit's cultures, values, and beliefs in the delivery of care and incorporates knowledge of unit's culture and resources.				
4. Identifies appropriate resources for project development or implementation.				
*5. Delivers efficient, effective, and quality product in an organized manner to promote leadership goals of the unit.				
6. Determines interventions that demonstrate knowledge of institutional policies and procedures and evidence-based practice.				
7. Synthesizes and applies knowledge and theories from humanities, behavioral & natural sciences, ethics, personal knowledge, socio-political, esthetic, empirical, and nursing science as a basis for decision-making in the development of the project.				
8. Design and implement a leadership/evidence based/or policy project on the assigned unit.				
*9. Demonstrate leadership skills as appropriate for the novice nurse in the setting.				
10. Effectively delivers findings and outcomes to internal or external audience.				
11. Identifies the need for and seeks appropriate supervision and consultation from preceptor, instructor, and other health team members.				
<b>EVALUATION</b>				
1. Evaluates the leadership/evidence based/or policy project and achievement of goals for assigned unit.				
2. Recognizes effects of interventions on unit resources, policies, practices, and culture.				
<b>PROFESSIONAL BEHAVIOR &amp; INFORMATION AND SYSTEMS MANAGEMENT</b>				
*1. Demonstrates all of the following expected behaviors on the assigned unit. A. Prepares appropriately for assigned responsibilities. B. Gives appropriate notice of clinical absence. C. Reports to clinical at assigned time. D. Remains in clinical for the entire shift. E. Exhibits professional behavior and adheres to the institution's professional policies and regulations.				
2. Provides clinical instructor with clinical schedule in advance and seeks approval for any schedule changes.				
3. Maintains an up-to-date log signed each day by preceptor and submits the log as a record of completed clinical hours.				
4. Uses critical thinking in planning, delivering and evaluating the leadership project. Completes all required assignments..				
5. Submits assignments electronically to clinical instructor by deadline.				

6. Meets with the unit nurse manager as a professional courtesy. Discusses the skills and education required to become a nurse manager. Discusses how the responsibilities of the nurse manager differ from those of the staff nurse.				
7. Explores the job descriptions of nursing personnel in the agency with the nurse manager and reports this information in the appropriate reflective journal.				
8. Identifies facility/unit quality improvement plan(s) and reports this information in applicable assignment(s).				
9. Demonstrates initiative in the clinical setting. Seeks new opportunities for learning and for modeling leadership behavior.				
10. Maintains client information in a confidential manner (follows HIPAA regulations).				
11. Applies knowledge of legal and ethical accountability in the provision of care.				
12. Demonstrates basic technological skills through the following activities: A. Use of computer skills in writing & in client documentation B. Use of retrieval information systems for collecting patient data & conducting searches for current research and other sources of evidence-based practice.				
13. Demonstrates professional behavior in written and oral communications with faculty, peers, and as a student representative of the School of Nursing on the Health Science Campus and in the community.				
14. Accepts and uses constructive criticism and advice from preceptor and instructor to identify and develop goals to improve clinical performance and/or professional behaviors. Accepts responsibility for own actions.				
15. Adheres to the policies of the School of Nursing and the University of Louisville (published handbook/policies).				

\*Leadership indicators

**MID-ROTATION EVALUATION SUMMARY**

Date: \_\_\_\_\_

Instructor Comments:

Student Comments:

Faculty Signature \_\_\_\_\_

Student Signature \_\_\_\_\_

Date:

Date:

**FINAL EVALUATION SUMMARY** Date: \_\_\_\_\_

Instructor Comments:

Student Comments:

Faculty Signature \_\_\_\_\_

Student Signature \_\_\_\_\_

Date:

Date:

### **CLINICAL INCIDENT REPORT POLICY**

All incidents, such as medication errors, an injury to a patient, exposure to communicable diseases, needle sticks or any incident that places a student at risk must be reported to the faculty member immediately upon occurrence. The student is responsible for completing the "Clinical Incident Report" (available from the School of Nursing Office) within 24 hours of the incident.

### **CLINICAL INCIDENT REPORT PROCEDURE**

1. Student must notify faculty member as soon as an incident has occurred.
2. Faculty must ensure (a) the student completes the clinical incident report in an accurate and timely manner and (b) the agency receives communication about the incident.
3. If the incident involves a student injury and/or exposure, the student should contact the HSC Student Health Services at 852-6446. There is a HSC Student Health Services physician on-call 24 hours a day, 7 days a week to advise individuals.
4. In the event of a non-sterile needle stick, the physician will determine the need for any required interventions. IF an intervention is determined to be necessary, the physician will explain the process and make arrangements for the student to obtain emergency post-exposure drugs, available 24 hours a day. Any required blood work may be completed during routine office hours (Monday-Friday, 8:00am-4:30pm) up to 3-4 days after the exposure. Students who are rotating out of town should also follow the same process. The HSC Student Health Office will make arrangements for any necessary drugs through a local hospital or pharmacy as needed. The cost of the on-call service, diagnostic testing for the student and the initial 5 day starter supply of medications is included in the student health fee.
5. Any incident involving a student(s) must be reported by completion of the Clinical Incident Report Form within 24 hours of the occurrence.
6. The completed Clinical Incident form must be submitted within 72 hours of the occurrence to the course coordinator who will then forward the form to the Associate Dean for Academic Affairs for signature.
7. Associate Dean for Academic Affairs should forward to the Dean for signature.
8. Signed form should be filed in office of Associate Dean for Academic Affairs.

**Approved: HSC Legal Council (Glenn Bossmeyer)**

**Date: September 13, 1999**

**Revised: October 3, 2001**

**Approved by HSC Legal Council, Glenn Bossmeyer October 3, 2001**

**Reviewed and Updated by Academic Affairs Committee, February 8, 2019**

University of Louisville School of Nursing  
CLINICAL INCIDENT REPORT

Clinical Facility \_\_\_\_\_ Date/Time of Incident \_\_\_\_\_

Student Name \_\_\_\_\_  
Address \_\_\_\_\_  
Phone (W) \_\_\_\_\_ (H) \_\_\_\_\_  
Insurance company \_\_\_\_\_  
Named Policy Holder \_\_\_\_\_

Clinical Facility/Site Agency Name \_\_\_\_\_  
Address \_\_\_\_\_  
Phone \_\_\_\_\_  
Area incident occurred \_\_\_\_\_  
Name of Facility/Unit Supervisor \_\_\_\_\_

Student description of incident, including others involved: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Student summary of how this incident could have been prevented/how will such incidents be prevented in the future: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

***Use back of report sheet if more room is required.***

Medical treatment given; including time and date \_\_\_\_\_  
\_\_\_\_\_

Any restrictions noted during medical treatment \_\_\_\_\_  
\_\_\_\_\_

IF THIS CLINICAL INCIDENT INVOLVES AN INCIDENT TO A STUDENT, THE STUDENT HAS BEEN ADVISED THAT THEY ARE RESPONSIBLE FOR THE COST OF HEALTH CARE SERVICES.

Report prepared by \_\_\_\_\_ Date of this report \_\_\_\_\_

Signature, Clinical Instructor \_\_\_\_\_ Date \_\_\_\_\_

Signature, Clinical Course Coordinator \_\_\_\_\_ Date \_\_\_\_\_

Signature, Program Director \_\_\_\_\_ Date \_\_\_\_\_

Signature, Assoc. Dean for Academic Affairs \_\_\_\_\_ Date \_\_\_\_\_

Signature, Dean \_\_\_\_\_ Date \_\_\_\_\_

