

Student Validation of Orientation

Students, prior to starting your clinical experience, please complete this form and submit to your faculty. If you will be performing clinicals at both Via Christi and Wesley, sign 2 forms (one for each agency) to submit.

I have read the Standardized Orientation for nursing students and the Agency specific information for:

____ Via Christi

____ Wesley Medical Center

I am aware of the resources available to me should I have additional questions.

Signature

Date

School

Graduation Date

Faculty member