

Record of Precepted Clinical Experiences

Date	Total Time	Location	Preceptor's Signature
02/26/2021	0645/1920	SG	F. Padilla RN
03/04/2021	0645/1930	SG	F. Padilla RN
03/05/2021	0645/1951	SG	F. Padilla RN
03/06/2021	0650/1900	SG	F. Padilla RN
03/08/2021	0646/1945	SG	F. Padilla RN

Preceptor's Signature _____

Preceptor's Signature _____