Covenant School of Nursing

Student Name Amber Bloedel

Record of Precepted Clinical Experiences

Date	Total Time	Location	Preceptor's Signature
7/30	1845-0715	SICU 3	Janni Boone
8/1	1845-0715	SICU 3	L. Logy RN
8/8	1845-0715	SICU 3	[illegible]
8/13	1845-0715	SICU 3	Jann Boone
8/14	1845-0715	SICU 3	Janni Boone
8/15	1845-0715	SICU 3	Janni Boone

Preceptor's Signature Janni Boone, RN

Preceptor's Signature Jann Boone, RN