

Record of Precepted Clinical Experiences

Date	Total Time	Location	Preceptor's Signature
3/12/23	12	SICU 4	<i>Emily Star</i>
3/13/23	12	SICU 4	<i>Emily Star</i>
3/22/23	12	SICU 4	<i>Emily Star</i>
3/23/23	12	SICU 4	<i>Emily Star</i>
3/30/23	12	SICU 4	<i>Emily Star</i>

Preceptor's Signature \_\_\_\_\_

Preceptor's Signature \_\_\_\_\_