Covenant School of Nursing

PMH CSON Student Community Site Verification Form

Instructional Module: IM 6

Student Name: Jany Dalaba

Instructor Contact Information:
Annie Harrison - (806) 224-3078
Jaynie Maya - (806) 928-8753

Community Site: Five Sky Ranch **Date:** _____
Student's Arrival Time: 11 am **Departure Time:** 3 pm
Printed Name of Staff: Ruth Gray **Signature:** [signature]

Community Site: _____ **Date:** _____
Student's Arrival Time: _____ **Departure Time:** _____
Printed Name of Staff: _____ **Signature:** _____

Community Site: _____ **Date:** _____
Student's Arrival Time: _____ **Departure Time:** _____
Printed Name of Staff: _____ **Signature:** _____

Community Site: _____ **Date:** _____
Student's Arrival Time: _____ **Departure Time:** _____
Printed Name of Staff: _____ **Signature:** _____

Community Site: _____ **Date:** _____
Student's Arrival Time: _____ **Departure Time:** _____
Printed Name of Staff: _____ **Signature:** _____

Covenant School of Nursing

PMH CSON Student Community Site Verification Form

Instructional Module: IM 6

Student Name: _____

Instructor Contact Information:
Annie Harrison - (806) 224-3078
Jaynie Maya - (806) 928-8753

Community Site: New Beginnings **Date:** 8-30-24
Student's Arrival Time: 8pm **Departure Time:** 9pm
Printed Name of Staff: Shelly Sjostrom **Signature:** Shelly Sjostrom

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Community Site: _____ **Date:** _____
Student's Arrival Time: _____ **Departure Time:** _____
Printed Name of Staff: _____ **Signature:** _____

Community Site: _____ **Date:** _____
Student's Arrival Time: _____ **Departure Time:** _____
Printed Name of Staff: _____ **Signature:** _____

Community Site: _____ **Date:** _____
Student's Arrival Time: _____ **Departure Time:** _____
Printed Name of Staff: _____ **Signature:** _____

Community Site: _____ **Date:** _____
Student's Arrival Time: _____ **Departure Time:** _____
Printed Name of Staff: _____ **Signature:** _____

Adopted: August 2016
Revised 7/17/24