

OB Community Verification Sheet

Instructional Module: IM 6

Student Name: Kaylee Herbert

Please call the CSON Instructor(s) should you have any additional comments regarding the student's performance and/or participation today.

Instructor Contact Information:

Gracie Nuttall – Cell (806) 724-5445 or Office (806) 725-8934

Rachel Soliz – Cell (806) 781-0689 or Office (806) 725-8951

Community Site: STD Clinic Date: 02-12-2025

Student's Arrival Time: 0815 Departure Time: _____
Printed Name of Staff: Annette Bincon Signature: Annette Bincon, RN

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: _____
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Student's Arrival Time: _____ Departure Time: _____
Printed Name of Staff: _____ Signature: _____