OBSERVATION WORK SHEET

SURGICAL TECHNOLOGY

Applicant instructions: This form must be completed by the operating room charge nurse working at the facility that you completed your observation. A minimum of eight (8) hours of observation must be completed.

This form must be submitted by email to HealthSciencesAdmissions@tridenttech.edu upon completion of your observation hours.

_____ _____

Applicant's Name Student ID #

This applicant has completed _____hours of observation work at

_____

Name of facility Phone Number

In _____

City State

_____

OR Charge Nurse (Please Print)

_____

Signature

_____

Date