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| **Student Name** | **Hospital Name** |
| **Unit Name** |  |

WSU COLLEGE OF NURSING   
N430 SENIOR PRACTICUM  **Hours and Log Sheet - Semester: Spring 2018**

**Please have your preceptor and any sub-preceptors clearly print their name & credentials, signature and initials. Thank you!   
  
Preceptor email\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(Include addt’l preceptors email below for our thank you letter).  
*PLEASE PRINT LEGIBLY SO WE CAN GIVE YOU CREDIT FOR YOUR TIME***

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| **Clearly printed Name/Credentials/Initials**  **e.g. Jane Doe, RNC/JD** | **Signature** | **Email**  **Address** | # of Years as RN | Total hours with this preceptor |
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**Automated Drug Dispensing Device, e.g. Pyxis orientation \_\_\_\_ (preceptor initials)**  
**Your Daily Log**

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| **Date** | **Unit** | **Hours**  **Worked**  **e.g. 0700-1930** | **Running Hours Total**  **e.g. 12/36** | **Preceptor Initials** |  | **Date** | **Unit** | **Hours**  **Worked**  **e.g. 0700-1930** | **Running Hours Total**  **e.g. 12/36** | **Preceptor Initials** |  | **Date** | **Unit** | **Hours**  **Worked**  **e.g. 0700-1930** | **Running Hours Total**  **e.g. 12/36** | **Preceptor Initials** |
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