

LifeBridge Health Student Passport/Roster Orientation Checklist

2021-2022 School Year

Facility for Rotation (Sinai, NW, Levindale): _____

Unit Name: _____ Unit Number: _____

School / Institution: _____

Name of the Course: _____

Dates of Rotation: _____ to _____ First Day on Unit: _____

Coordinator's Name (print): _____ Coordinator's Phone (print): _____

Coordinator's Email: _____

Instructor's Name (print): _____ Instructor's Phone (print): _____

Instructor's Email (no personal emails will be accepted): _____

Universal Passport Requirements per Manual

Passport and all required paperwork must be sent together before processing will start.

PLEASE ALLOW 15 BUSINESS DAYS FOR PROCESSING

[See ProAdvantage for Paperwork](#)

	If LifeBridge Employee Note With * & include copy of LifeBridge Badge	Previous Clinical at same Facility	Birth Month & Day (Ex. 01/01)	Drug Testing	Criminal Background Check	Immunizations (Hepatitis B, Influenza) per contract guidelines	TB	CPR or BLS Certification	Orientation Manual Verification & Parking & Badging Registration Form	EMR online module certificate (only if EMR access requested)	Driver's license or Government Issued ID	Covid19 Education Attestation Form	Women's & Children's Security Certificate (Sinai Only)	2021-2021 Clinical Guidelines - Instructor Only
Instructor(s) First, Middle, and Last Name (Print)														
Students' First, Middle, & Last Name (Print)														
														NA
														NA
														NA
														NA
														NA
														NA
														NA
														NA
														NA
														NA
														NA
														NA
														NA
														NA

I attest the above information is complete and accurate.

Coordinator's Signature: _____

*Instructor **Electronic Medical Record** Access (Meds Administration) Yes ___ No ___

*Student **Electronic Medical Records** Access (Meds Administration) Yes ___ No ___

*Send Passport/Roster/Required forms to nursingstudents@lifebridgehealth.org