

UPSTATE

UNIVERSITY HEALTH SYSTEM

**Upstate University Hospital
NON-EMPLOYEE ORIENTATION GUIDE
Completion Certificate**

School:
Instructor:
Term:

My signature here confirms that I have read and understand Upstate Medical University's Non-Employee Orientation guide and that I have no questions at this time.

Name	Badge #	Assigned Unit	Signature	Date
Instructor:				

Send via email/attachment to Caitlin Nye, MSN, RN-BC
Nurse Residency and Onboarding Coordinator
Upstate University Hospital
315.464.6142
nyec@upstate.edu

UPSTATE

UNIVERSITY HEALTH SYSTEM

**Upstate University Hospital
Affiliating School/College of Nursing Clinical Experience Manual – Student
Completion Certificate**

School:

Instructor:

Term:

My signature here confirms that I have read and understand Upstate Medical University's Affiliating School/College of Nursing Clinical Experience Manual – Student and that I have no questions at this time.

Name	Badge #	Assigned Unit	Signature	Date

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