

**Upstate University Hospital
 Attestation of Orientation for Nursing Clinical Rotations
 Completion Certificate**

School:

Instructor:

Term:

My signature here confirms the following:

- I have read and completed the Affiliating School College of Nursing Clinical Experience Manual-Faculty and Students
- I have read and completed the required Brightspace education modules

Name	Badge #	Assigned Unit	Signature	Date
Instructor:				

Send via email/attachment to NRecruit@upstate.edu
 Nursing Recruitment and Retention
 Upstate University Hospital

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