STUDENT:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Z NUMBER:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_FAU E-MAIL:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
ADDRESS:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_TELEPHONE:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
Course: NGRL\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Semester & Year:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Population Focus Summary**

|  |  |  |
| --- | --- | --- |
| **Population Focus** | **Number of Clinical Hours/Visits** | **Running Total Number of Clinical Hours/Visits from Previous Semesters** |
| **Women’s Health Summary** (well woman, pelvic exam, family planning, menopause, OB, pre or post natal) Include copy of eLogs Women’s Health Summary. 100 hours required for FNP & AGNP |  |  |
| **Pediatrics** 0-21 years  100 hours required for FNP |  |  |
| Ages 22-55 |  |  |
| Geriatrics 56 and older |  |  |
| **Total Clinical Hours this Semester** |  |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| NAME OF SITE | PRECEPTOR’S NAME | PRECEPTOR’S ADDRESS  PHONE NUMBER AND E-MAIL | TOTAL HOURS WITH PRECEPTOR | FACULTY RECOMMENDS SITE AND PRECEPTOR YES OR NO | STUDENT RECOMMENDSSITE AND PRECEPTOR YES OR NO |
| #1 |  | **E-mail** |  |  |  |
| #2 |  | **E-mail** |  |  |  |
| #3 |  | **E-mail** |  |  |  |

CLINICAL FACULTY SIGNATURE:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_DATE:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
PRINT NAME:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_E-MAIL:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
TOTAL HOURS COMPLETED THIS SEMESTER:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_