

**IMPORTANT INSTRUCTIONS:** Submitting Documents for *Pomona Valley Hospital Medical Center (PVHMC)*

**CAREFULLY READ AND FOLLOW ALL STEPS LISTED BELOW.**

**1. Complete and Sign this Check-off Sheet:**

- You may sign the form either **physically (by hand) or digitally.**
- **Helpful Hint:** For digital signatures, use tools like Adobe Acrobat or your device's built-in signing features. Your campus login gets you desktop and mobile apps including [Adobe Creative Cloud](#).

**2. Review the following:**

PV Basic Orientation Packet

**3. Review, sign, and submit the following:**

PV Basic Orientation Acknowledgement Form

PV Confidentiality Statement

PV Hospital Access Request Form

- Complete all highlighted sections
- SON Office Telephone: (657) 278-3336
- Cellular Telephone: Use your personal phone number.

**Only WET SIGNATURES will be accepted, please do not type in your signature.**

**4. Submit Your Packet:**

- Submit all documents (ink-signed) **in person to EC-190.**

**PLEASE NOTE:** *If you are instructing at Pomona Valley for TWO clinical courses, then you will need to submit TWO separate sets of documentation. One set of documents for each rotation.*

**5. New instructors will need to coordinate and complete any additional tasks:**

- Contact Christy Ward, [Christy.Ward@pvhmc.org](mailto:Christy.Ward@pvhmc.org), and Irene Jaramillo, [Irene.Jaramillo@pvhmc.org](mailto:Irene.Jaramillo@pvhmc.org), at PVHMC to coordinate any additional requirements.

I have reviewed all instructions and materials, verified them, and completed all facility-specific requirements listed above for the site I will be attending.

Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_