CSUF | School of Nursing
COLLEGE OF HEALTH AND HUMAN DEVELOPMENT

Faculty Facility-Specific Documents Check-Off Sheet

IMPORTANT INSTRUCTIONS: Submitting Documents for *UCI Medical Center (UCIMC)*

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:**
   ☐ **Nursing Student Clinical Rotation Orientation**
   ☐ **Monitoring Yourself for Infection Symptoms**
   ☐ **Keeping Your Family Safe If You Have COVID-19**
   ☐ **Concerns About COVID-19 Exposure**
   The School of Nursing will complete the UC Irvine Epic Computer Training Information Form on your behalf. If you are a current employee of UCI or have even instructed at UCI in a previous rotation, please check this box: ☐

3. **EPIC Online Training**
   Instructions regarding EPIC trainings will be provided by your clinical instructor to you, once UCIMC has processed all documents.

4. **Review, sign, and submit the following:**
   ☐ **Confidentiality Agreement (2 pages) Print out both pages then complete, sign, and date page 2 in ink (wet signature)**
   ☐ **Flu vaccine record**
   This is required during the flu-season months only (October through May).
   FALL Semester: We will access your Flu Vaccine record in early October through Castle Branch.
   SPRING Semester: **Please include a copy of your Flu Vaccine record with your document packet.**

5. **Scan Your Documents (if needed):**
   - **SCAN** all required pages into one PDF document (NO JPEGs or separate files).
   - ***Helpful Hint:*** If you have JPEGs or image files, paste them into a Word document and save as a PDF.
   - Use free smartphone scanner apps (e.g., Apple Notes, Google Drive mobile app, Genius Scan, or Tiny Scanner) to convert images to PDFs when necessary.

6. **Submit Your Packet:**
   - **Email the completed PDF** (as 1 PDF File), including the Check-Off sheet, to clinicalplacement@fullerton.edu

7. **Contact UCI to coordinate potential additional requirements:**
   - Claudia Beas
     - claudild@hs.uci.edu
   - Please CC clinicalplacement@fullerton.edu

I have reviewed all instructions and materials, verified them, and completed all facility-specific requirements listed above for the site where I will be instructing. I have introduced myself to the academic liaison to coordinate potential additional requirements.

Name: _____

Signature: _____ Date: _____