

Appendix A

Graduate Nursing Preceptor Acknowledgement Form

St. Thomas University College of Nursing Graduate Nursing Program

(Please retain a copy for your record.)

Thank you for serving as a preceptor for our Graduate Nursing Program. Your expertise and commitment are essential to providing students with meaningful clinical learning experiences. This acknowledgement confirms receipt of preceptor materials and understanding of the responsibilities and expectations associated with the preceptor role.

Preceptor Information

Preceptor Name: _____

Credentials: _____

Practice Setting: _____

Employer: _____

Student Name: _____

Faculty Member: _____

Preceptor Handbook

By initialing below, I acknowledge that I have:

_____ Received the Graduate Nursing Preceptor Handbook (Preceptor Book).

_____ Reviewed the handbook and understand the information, policies, and procedures contained within it.

_____ Know how to contact the course faculty if questions or concerns arise during the clinical experience.

Preceptor Responsibilities and Expectations

By signing this form, I acknowledge that I understand and agree to:

- ☐ Provide a safe, professional, and supportive clinical learning environment.
- ☐ Orient the student to the clinical site, applicable policies, workflow, and patient care expectations.
- ☐ Facilitate clinical learning experiences that support the student's approved course and clinical objectives.
- ☐ Supervise the student's clinical activities consistent with organizational policies and applicable state and federal regulations.
- ☐ Provide regular feedback regarding the student's clinical performance, professionalism, communication, and clinical reasoning.
- ☐ Notify the course faculty promptly of any concerns related to student performance, professionalism, patient safety, attendance, or conduct.
- ☐ Complete required student evaluations and documentation within established program timelines.

Preceptor Handbook

- ☐ Promote patient confidentiality and compliance with HIPAA and all applicable privacy regulations.
- ☐ Model ethical, evidence-based, culturally sensitive, and professional nursing practice.
- ☐ Collaborate with course faculty regarding student progress and learning needs.

Student Expectations

I understand that graduate nursing students are expected to:

- ☐ Arrive prepared, punctual, and professionally dressed according to program and agency policies.
- ☐ Maintain current required compliance documentation before participating in clinical experiences.
- ☐ Demonstrate professional behavior, accountability, integrity, and respect toward patients, families, staff, and the healthcare team.
- ☐ Maintain patient confidentiality and comply with HIPAA and institutional policies.
- ☐ Communicate promptly regarding absences, tardiness, or schedule changes.
- ☐ Accept constructive feedback and incorporate recommendations into clinical practice.
- ☐ Practice only within the scope permitted by the clinical course, institutional policy, and supervision of the preceptor.
- ☐ Complete assigned clinical documentation, logs, and course requirements by established deadlines.
- ☐ Demonstrate initiative in learning while recognizing personal limitations and seeking guidance when appropriate.
- ☐ Adhere to all STU CON, clinical agency, and professional standards during their entire clinical experience with me.

Acknowledgement Statement

I acknowledge that I have received the Graduate Nursing Preceptor Handbook and have reviewed the information regarding the Graduate Nursing Program. I understand the responsibilities and expectations of the preceptor role, as well as the expectations established for graduate nursing students. I agree to fulfill the responsibilities of a graduate nursing preceptor to the best of my ability and to collaborate with the assigned faculty member throughout the clinical experience.

Print	Signature	Date
Preceptor Name:		
Student Name:		
Clinical Coordinator:		

Program Contact Information

Program Director: _____
Faculty Contact: _____
Phone: _____
Email: _____