

PRECEPTORSHIP ATTENDANCE LOG

Enter starting time (in) and ending time (out) and total number of hours worked each day (in quarter hours). If no work was performed, enter one of the following: DO-Day Off, S-Sick, H-Holiday. Preceptees are expected to work the same schedule as the supervising preceptor. However, a preceptee must work a total of not less than eight (8) weeks. Days off, sick time, and holidays do not count as days worked. A minimum of 40 hours per week during a maximum of six (6) calendar days per week will be counted. A calendar day shall not exceed twelve (12) hours in duration.

THERE MUST BE STRICT ADHEREANCE TO THE DATES OF PRECEPTORSHIP AGREEMENT FORM.
MUST TOTAL MINIMUM OF 40 HOURS EACH WEEK

Sample: WEEK A – Day/Date In Out Total (Qtr Hrs)

Mon, May 6 Sat 7:15pm 11:25

WEEK 1 – Day/Date In Out Total (Qtr Hrs)

WEEK 5 – Day/Date In Out Total (Qtr Hrs)

WEEK 2 – Day/Date In Out Total (Qtr Hrs)

WEEK 6 – Day/Date In Out Total (Qtr Hrs)

WEEK 3 – Day/Date In Out Total (Qtr Hrs)

WEEK 7 – Day/Date In Out Total (Qtr Hrs)

WEEK 4 – Day/Date In Out Total (Qtr Hrs)

WEEK 8 – Day/Date In Out Total (Qtr Hrs)

I HEREBY CERTIFY THAT THE INFORMATION CONTAINED ON THIS ATTENDANCE LOG REPRESENTS ACTUAL WORK PERFORMED TO THE BEST OF MY KNOWLEDGE:

Preceptor's signature verifies accuracy of this final report:

Preceptor Signature: _____ Date: _____

Practice Name: _____

Preceptee Name (Print):

_____ Date: _____

Signature: _____

OFFICE USE:			
Ckd by	Date	Hrs	Wks