

Student Details			
Flinders Student ID:		Phone Number:	
Family Name:		Given Name(s):	
Email Address:			

Topic Placement

- CARDIAC**
- NURS8741 Professional Experience in Resuscitation Across the Lifespan (offered in Semester One & Two)** - 24 x 8 hour shifts (192 hours)
 - NURS8755 Cardiac Nursing (PEP) (offered in Semester 2)** - 20 x 7.5 hour shifts (150 hours)
- CRITICAL CARE**
- NURS8741 Professional Experience in Resuscitation Across the Lifespan (PEP) (offered in Semester One & Two)** - 24 x 8 hour shifts (192 hours)
 - NURS8743 Critical Care Nursing Practice (PEP) (offered in Semester 2)** – 24 x 8 hour shifts (192 hours)
- EMERGENCY**
- NURS8750 Emergency Nursing Practice 1 (PEP) (offered Semester 1)** – 24 x 8 hour shifts (192 hours)
 - NURS8752 Emergency Nursing Practice 2 (PEP) (offered Semester 2)** – 24 x 8 hour shifts (192 hours)
- HIGH DEPENDENCY**
- NURS8741 Professional Experience in Resuscitation Across the Lifespan (PEP) (offered in Semester One & Two)** – 24 x 8 hour shifts (192 hours)

Student must be employed in the clinical specialist setting to complete the placement topic

Students are required to show evidence that their employer will support the completion of the clinical practice components of the topic.

Employer confirmation			
Clinical Manager's Name:			
Clinical Manager's Email:		Clinical Manager's Phone Number:	()
Organisation's Name in full:			
Ward/Area			
Is student employed at this venue?	<input type="checkbox"/> Yes <input type="checkbox"/> No		
Organisation's Street Address:			
Proposed placement dates:			

I agree that the required support will be provided to the applicant to undertake the professional experience placement components of the course within this workplace (*please tick*):

- Provide the required number of placement hours in the designated nursing environment
- Allocate or assist with the choice of preceptor(s) in the clinical area
- Supervision in and assistance with acquisition of clinical skills
- Provide guaranteed support for the entirety of the agreed placement duration

Clinical Manager's Signature:		Date:	
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Student's Signature:		Date:	
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