



Date/Time Received:

Clinical Rotation Exchange Request

Name:

Date:

S#:

Email:

Assigned Hospital/Facility:

Shift:

Number of clinical assignments exchanged:

Course Number:

Student signature:

Student volunteering to swap

Name:

S#:

Email:

Assigned Hospital:

Shift:

Student Signature:

Faculty Lead Instructor Name:

Signature:

Approved

Disapproved

If disapproved, please provide rationale below:

Process Guidelines:

- Responsibility to find a volunteer relies solely on the requesting student. Faculty and Clinical Coordinators will not facilitate requests between students.
- Students may only switch with another student in the same course during the same bimester (i.e., 1006 B1 cannot switch with a student in 1006 B2, etc.)
- All signatures must be obtained by the requesting student. Digital signatures are not allowed at this time.
- Upon completion, requesting student will provide form to clinical coordinator for processing.
- Rotation swaps should only be requested if all other options have been exhausted (i.e., daycare, work, etc.).
- Students must submit request within 1 week of clinical assignments posting on D2L. Forms received after this deadline will not be accepted.
- Submitting a request does not guarantee automatic approval.
- Students will be notified of decision via email.