

Pre-Arrival Orientation Checklist – Nursing ONLY

Your Name: _____

Agency or School Name: _____

Review General Topics

✓ Complete

Code of Conduct	<input type="checkbox"/>
Appearance Policy	<input type="checkbox"/>
Cultural Diversity	<input type="checkbox"/>
General Safety Presentation	<input type="checkbox"/>
Patient Safety	<input type="checkbox"/>
Infectious Disease Control	<input type="checkbox"/>
Pain Management	<input type="checkbox"/>
COVID-19 Education	<input type="checkbox"/>

Print, Review, and Sign Required Forms

✓ Complete

Signed Non-Employee Confidentiality form	<input type="checkbox"/>
Signed Code of Conduct Acknowledgement form	<input type="checkbox"/>
Signed Acceptable Use Agreement form	<input type="checkbox"/>

For Nursing Contract Personnel Only

✓ Complete

Received Stafferlink Log In and Password Information	<input type="checkbox"/>
Sent signed required forms to the hiring agency 1 week prior to start date	<input type="checkbox"/>

I, _____, have received, read and understand the contents of the **information I received above**. I have read and understand the contents of the material provided. I understand that I am responsible for abiding by Providence Regional Medical Center Everett policies in relation with this material and my student experience. By my signature below, I acknowledge, understand, accept and agree to comply with the information contained in the forms provided to me.

Signature

Print Name: _____

Date: _____