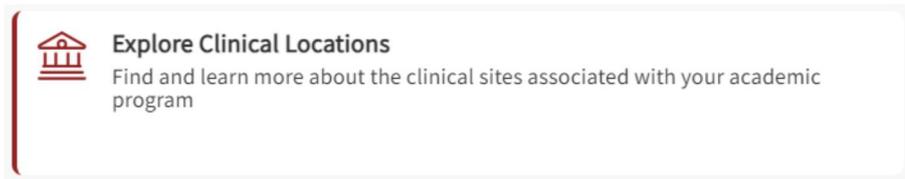


Requesting Placement via My Request

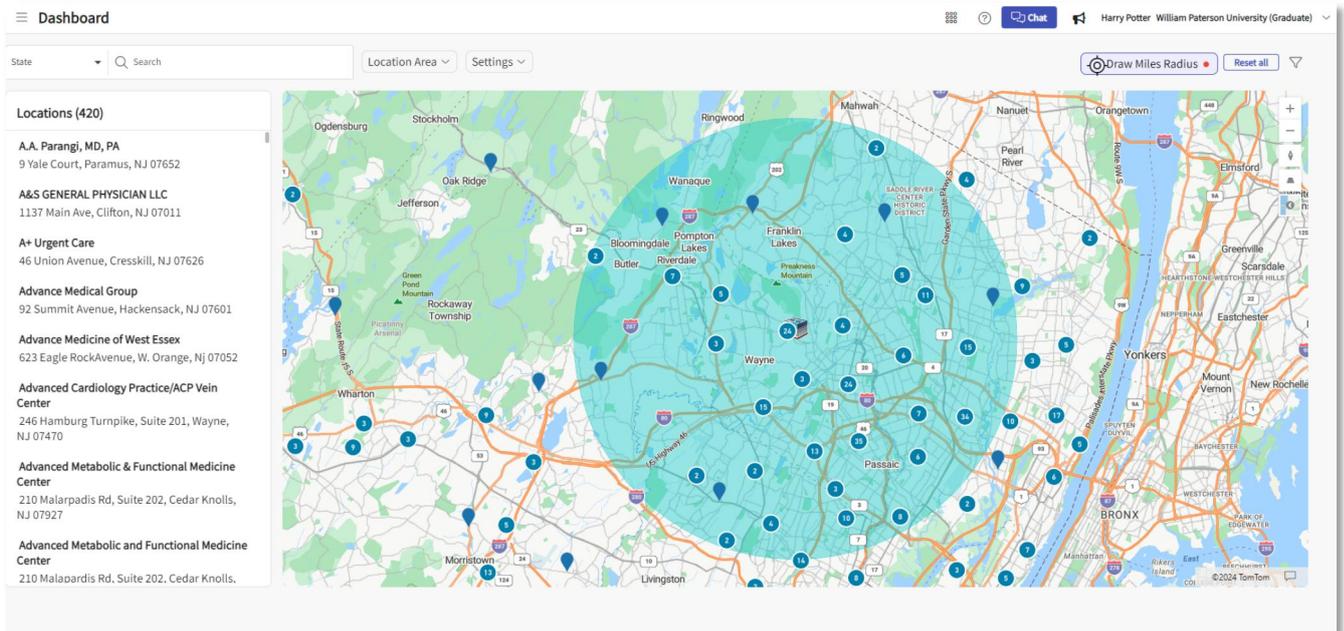
Prism

Your program may collect placement preferences using the feature My Request. My Request is a type of wishlist that allows you to submit entries to be considered for a placement with clinical sites.

When attempting to search for a clinical location in the "Explore Clinical Location" section, it is essential to verify that the same terminology and address are used. If you encounter difficulty finding a record, it could be due to the location being a new placement site. In such instances, the school may need to contact the site to arrange a placement for you. If this situation arises, please proceed directly to the "Raising a Placement Request" section.

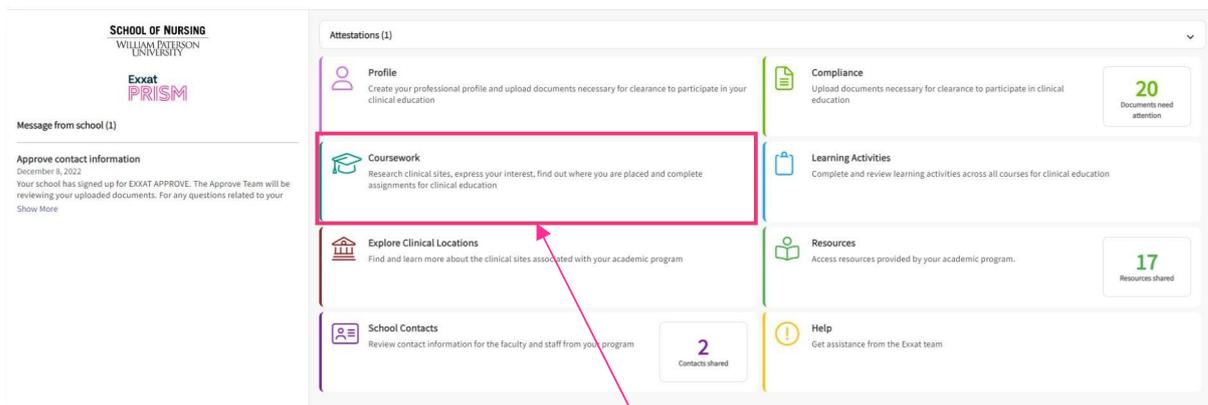


Please be aware that this feature allows you to view the site name or address information on the map.



Raising a Placement Request:

1. After logging in, the student should click on the Coursework tile.



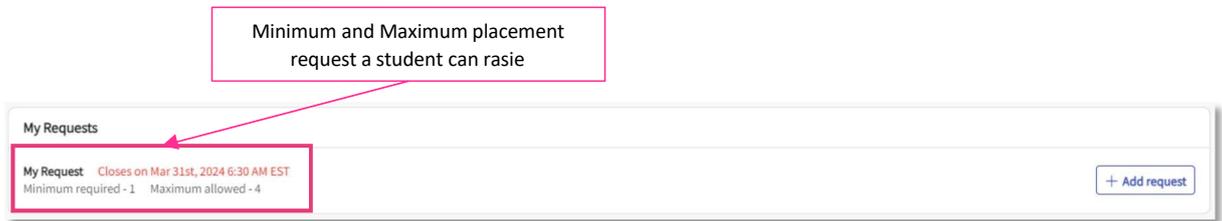
Click on the Coursework

2. Select the placement that you need to complete a My Request form for by clicking View Details

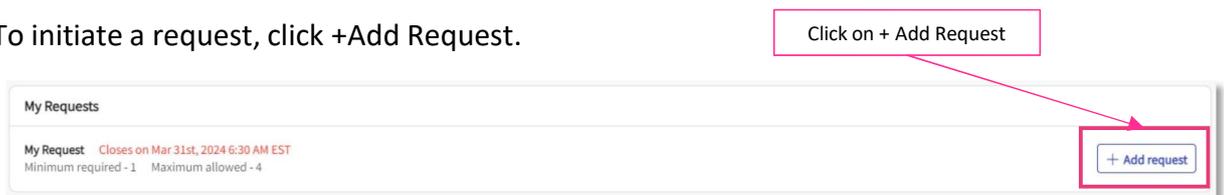
| COURSE DETAILS | PLACEMENT DETAILS | LOCATION AND SETTING DETAILS | NEEDS ATTENTION | ACTION |
|--|---|--|--|------------------------------|
| NUR 6041 - Advanced Nursing Practicum I Current | Summer 2024 NUR 6041 Feb 1, 2024 - May 15, 2024 | A+ Urgent Care Urgent Care | Attestation pending My Request closes on May 1st, 2024 12:00 PM EST | View Details |
| NUR 6041 - Advanced Nursing Practicum I Upcoming | Spring 2 NUR 6041 - Advanced Nursing Practicum I Mar 25, 2024 - May 12, 2024 | Mock Location 2 Rehabilitation | Attestation pending My Request closes on May 12th, 2024 12:00 AM EST | View Details |
| NUR 6041 - Advanced Nursing Practicum I Upcoming | Spring 2 NUR 6041 - Advanced Nursing Practicum I Mar 25, 2024 - May 12, 2024 | Advance Medical Group Urgent Care/Primary Care | Attestation pending My Request closes on May 12th, 2024 12:00 AM EST | View Details |
| NUR 0000 - Placement Request | - | - | My Request closes on May 12th, 2024 12:00 AM EST My Request closes on Mar 15th, 2024 12:00 PM EST | View Details |
| 1 - Mock course 1 Completed | Mock Rotation-5 Mar 1, 2023 - Mar 31, 2023 | Mock Location 4 Adult Gerontology | Attestation pending | View Details |

Click on View Details button

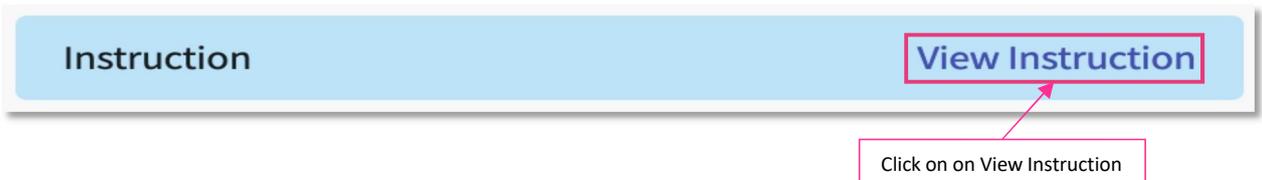
3. You will find a My Request section towards the bottom of the page.
 - a. You will see a minimum and maximum number of requests you are able to make for each course. These limits have been set by your program.



4. To initiate a request, click +Add Request.



5. Instructions your school has written to help you in completing this request form are minimized by default but can be viewed by clicking View Instructions on the right side of the blue bar at the top of the page.



6. The request form will contain multiple sections. Click Submit once done to finalize your request and send it to your school. Once you Submit, you will not be able to edit the form.
 - a. You can always Save your progress and complete the form at a later time.
 - b. You can wipe the form clean to start over by clicking Clear All.
 - c. Please note, the sections you see may differ from those in the screenshot below.



Expand the drawer to view all the fields to be completed.



d. Whole Placement Request form.

← My Request | Rotation [Mar 1, 2024 - Aug 31, 2024]

Clear All Save Submit

Basic Information ^

| | | | |
|----------------------|----------------------|----------------------|----------------------|
| Year * | Course * | Term * | Type of Program * |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| Specialty * | Duration(Hours) * | | |
| <input type="text"/> | <input type="text"/> | | |

Location Information ^

| | | | |
|----------------------|----------------------|----------------------|----------------------|
| Location Name * | Site Name | Contact First name * | Contact Last name * |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| Email * | Business phone * | Business fax | Website |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| Address Line 1 * | Address Line 2 | City * | State * |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| Zip code * | | | |
| <input type="text"/> | | | |

Preceptor Information ^

| | | | |
|----------------------------|-------------------------------------|----------------------|----------------------|
| Prefix | Credentials * | First name * | Last name * |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| Business phone * | Mobile phone | Email * | License Number * |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| Board Certification Body * | Board Certification Expiration Date | | |
| <input type="text"/> | <input type="text"/> | | |

Board Certification Document (Only for NP Preceptors)

📁 Browse to upload

Supported formats: .pdf, .doc, .jpg, .jpeg, .png, .docx, .xlsx, .pptx, .pptm, .potx, .potm, .ppt, .rtf, .xls, .docm, .bmp, .csv, .gif, .tiff, .mp4
You can only upload files with file size under 10 MB.
We recommend switching to PDF format if you encounter issues viewing the uploaded file in other formats.

Preceptor CV

📁 Browse to upload

Supported formats: .pdf, .doc, .jpg, .jpeg, .png, .docx, .xlsx, .pptx, .pptm, .potx, .potm, .ppt, .rtf, .xls, .docm, .bmp, .csv, .gif, .tiff, .mp4
You can only upload files with file size under 10 MB.
We recommend switching to PDF format if you encounter issues viewing the uploaded file in other formats.

Additional Details (Optional) ^

Additional Comment

Additional Documents (Optional) ^

Upload Document

📁 Browse to upload

Supported formats: .pdf, .doc, .jpg, .jpeg, .png, .docx, .xlsx, .pptx, .pptm, .potx, .potm, .ppt, .rtf, .xls, .docm, .bmp, .csv, .gif, .tiff, .mp4
You can only upload files with file size under 10 MB.
We recommend switching to PDF format if you encounter issues viewing the uploaded file in other formats.

Additional information ^

Student Employment

Are you (the student) employed by this clinical location?*

No Yes

Self Placement Graduate Student Attestation ^

Student Agreement*

I understand that this information is required of all students prior to going to any clinical/practicum site/location. I further understand that my preceptor's license must be current, free from any stipulations, and not encumbered in any way. This will be validated immediately prior to beginning my clinical/practicum. I will work to have a backup site/preceptor in case my preceptor's license becomes encumbered in any way. My choice below indicates that I have fulfilled all the immunization and certification requirements and will remain in compliance all throughout my clinical experiences, and that the information provided herein is complete and accurate. By checking this box I AGREE:

I do not have an encumbered nursing license in ANY STATE. By clicking 'I agree,' I am attesting that my nursing licensure is current (not expired) and unencumbered without stipulations, disciplinary action, or restrictions of any kind. If you cannot attest to this statement and therefore cannot complete this proposal survey, please notify your clinical coordinator. By checking this box I AGREE

Student Enrollment*

I understand that I am required to enroll in the appropriate clinical practicum course at William Paterson Nursing. If I fail to register and pay for the appropriate course, my hours will not count and I will need to repeat all logged hours. An approved placement does not mean that I am enrolled in the course.

Comments +

No comments added click + button to add comments



7. Once you have saved or submitted a request, your program will be able to review them. As your program reviews them, you will receive updates via email.
8. The status may change to any of the following:
 - a. Placement Confirmed: Your school has completed their review and secured a clinical placement for you with the requested clinical site or preceptor.
 - b. Request Not Approved: our school has completed their review of your request and will not be able to secure a clinical placement for you with the requested clinical site or preceptor.
 - c. Need More Information: Your school needs additional details, make sure to review comments provided.

My Requests

Spring 2 Placement Request Closes on May 12th, 2024 12:00 AM EST
 Minimum required -1 Maximum allowed -4 + Add request

Mock Location 2 Cleared for Clinical & Placed
 Mock Person

Advance Medical Group Cleared for Clinical & Placed
 Jami J
 School comment: Need copy of resume

← Spring 2 Placement Request | Spring 2 - 2024 Placement Request [Dec 11, 2023 - May 12, 2024] Cleared for Clinical & Placed

Instruction View Instruction

Basic Information

Year * 2024 Course * NUR 6041 Term * Spring 2(Online) Type of Program * Online
 Speciality * Primary Care Duration(Hours) * 170

Location Information

Location Name * Advance Medical Group Site Name Contact First name * Lyda Contact Last name * A
 Email * ldot@example.com Business phone * (123) 123-1234 Business fax Website
 Address Line 1 * 82 Summit Avenue Address Line 2 City * Hackensack State * NJ
 Zip code * 07601

Preceptor Information

Overall Status Cleared for Clinical & Placed
 Dec 15, 2023 2:56 PM EST
Compliance Approved
 Dec 15, 2023 2:44 PM EST
Contract Approved
 Dec 15, 2023 2:55 PM EST
Preceptor Approved
 Dec 15, 2023 2:55 PM EST

Comments View all comments(1)

Ivy Sosoban
 Need copy of resume Dec 15th, 2023

When students click on the location name for which they've submitted a placement request, they can monitor the status of all sections.



9. To view any comments provided by your school or add comments for them to view, click on the site request. The form will show you to latest comment, but you can click on View all Comments to see all updates. To add a comment, click on the + icon.

The screenshot shows a web form for a 'Spring 2 Placement Request'. The form is divided into several sections: 'Basic Information', 'Location Information', and 'Preceptor Information'. On the right side, there is a 'Comments' section. A red box highlights the 'Comments' section, which contains a 'View all comments(1)' link and a comment from 'hy Soeban' dated 'Dec 15th, 2023' with the text 'Need copy of resume'. A red arrow points from the text box below to the 'View all comments(1)' link.

← Spring 2 Placement Request | Spring 2 - 2024 Placement Request | (Dec 11, 2023 - May 11, 2024) Cleared for Clinical & Placed

Instruction [View Instruction](#)

Basic Information

Year * 2024 Course * NUR 6041 Term * Spring 2(Online) Type of Program * Online

Specialty * Primary Care Duration(Hours) * 170

Location Information

Location Name * Advance Medical Group Site Name Contact First name * tyda Contact Last name * A

Email * htd@example.com Business phone * (123) 123-1234 Business fax Website

Address Line 1 * 92 Summit Avenue Address Line 2 City * Hackensack State * NJ

Zip code * 07601

Preceptor Information

Overall Status Cleared for Clinical & Placed
Dec 15, 2023 2:56 PM EST

Compliance Approved
Dec 15, 2023 2:44 PM EST

Contract Approved
Dec 15, 2023 2:55 PM EST

Preceptor Approved
Dec 15, 2023 2:55 PM EST

Comments +

[View all comments\(1\)](#)

hy Soeban
Need copy of resume
Dec 15th, 2023

Students have the ability to see comments from the school in the Comments section.

