

# Instructor Compliance

I have reviewed the required information for Instructor Orientation to Infirmiry Health. I understand that if I have questions I am to call the Infirmiry Health contact person:

**Infirmiry LTAC Hospital** – Stefanie Willis-Turner | 251-435-7410

**Mobile Infirmiry** – Stefanie Willis-Turner | 251-435-7410

**North Baldwin Infirmiry** – Tiare Groves | 251-580-1766

**Oakwood** – Marla Jordan | 251-937-3501

**Thomas Hospital** – Phyllis Tate | 251-279-1702

School/University \_\_\_\_\_ Date \_\_\_\_\_

Instructor \_\_\_\_\_

.....

I, \_\_\_\_\_  
Dean or designee (print name)

validate that \_\_\_\_\_  
Instructor (print name)

is competent to provide clinical supervision for students.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**NOTE:** This form must be completed and on file with the Infirmiry Health facility for each instructor utilizing Infirmiry LTAC Hospital/Mobile Infirmiry/North Baldwin Infirmiry/Oakwood/Thomas Hospital as a clinical site.