SCHOOL OF NURSING FIT FOR PROGRAM FORM

(Student Name)

The person identified above has been accepted to the Avila University nursing program. This document serves as a release that the nursing student can <u>fully participate</u> in all classroom, laboratory, and clinical activities required for the nursing program.

- Please be advised that in the course of these activities the student will, at a minimum, be:
 - expected to lift and transport patients of a variety of weights,
 - expected to maintain stamina for a 12 hour shift,
 - expected to stand and walk for prolonged periods of time, and
 - expected to have cognitive function that enables safe patient care.

If you have any questions about this form and/or student activities, please contact the Avila University School of Nursing at 816.501.3672.

_____This student is able to fully participate in all School of Nursing classroom, laboratory and clinical activities.

Printed Name and Credentials of Health Care Provider:

Signature and Credentials of Health Care Provider:

Contact Information:_____