

## Nursing Student Assignment Sheet

Date: \_\_\_\_\_

Clinical Instructor: \_\_\_\_\_

School: \_\_\_\_\_

Instructor Contact Number: \_\_\_\_\_

\*Time on Unit: \_\_\_\_\_

\*Time Leaving Unit: \_\_\_\_\_

Student: Patient /Room#	Responsibilities (please circle tasks the student will be expected to perform)		Comments (Please specify any specific focus the student might have)
Student: Patient /Room#	<input type="checkbox"/> Ambulation <input type="checkbox"/> Assessment <input type="checkbox"/> Bath <input type="checkbox"/> Bed <input type="checkbox"/> Documentation	<input type="checkbox"/> IM Meds <input type="checkbox"/> IV Med <input type="checkbox"/> Oral Meds <input type="checkbox"/> Personal Care <input type="checkbox"/> Treatments	
Student: Patient /Room#	<input type="checkbox"/> Ambulation <input type="checkbox"/> Assessment <input type="checkbox"/> Bath <input type="checkbox"/> Bed <input type="checkbox"/> Documentation	<input type="checkbox"/> IM Meds <input type="checkbox"/> IV Med <input type="checkbox"/> Oral Meds <input type="checkbox"/> Personal Care <input type="checkbox"/> Treatments	
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# Sample Of Nurse Aid Assignment Sheet

**M Woodhall**



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