

Dear Preceptor: Students who wish to be considered for selection into Penn College's surgical technology program must complete a total of four clinical observation hours in the operating room.

We ask that preceptors complete this log as a record of the student's time in the operating room.

Thank you for your assistance!

Student Name: _____

Name of Facility: _____

	Date(s) of Observation	Total Hours	Preceptor Name (print) and sign below
#1			
#2			
#3			

Preceptor #1 Signature: _____ Email: _____

Preceptor #2 Signature: _____ Email: _____

Preceptor #3 Signature: _____ Email: _____

Student Signature: _____

STUDENT: Please return this form to the Surgical Technology Program Office by December 1st.

Pennsylvania College of Technology
One College Avenue
DIF 14
Williamsport, PA 17701

Or by email to surgtech@pct.edu