



## Affiliation Guidelines

Hello and thank you for your interest in an affiliation with Parrish Medical Center (PMC).

PMC offers a variety of experiences to benefit students in our community pursuing degrees related to healthcare professions. These guidelines define the types of experiences and the required criteria for affiliation consideration.

### Types of student experiences:

- **Observation:** one-time, 2-4 hour experience to observe a healthcare professional one-on-one to learn about a typical “day in the life” in that role
- **Clinical rotation:** experiential program lasting multiple weeks allowing students hands-on experiences in an area of healthcare
- **Internship:** non-paid experiential program lasting multiple weeks allowing students to experience one or several areas of healthcare as defined within their program’s curriculum objectives

### Criteria for affiliation consideration:

- Accredited school/program (proof of accreditation required)
- Program must be one of the following:
  - Nursing (ADN, BSN, MSN)
  - Certified Nursing Assistant
  - Emergency Medical Technician
  - Surgical Scrub Technician
  - Phlebotomy
- Non-clinical programs, and clinical programs not mentioned above, will be considered on a case-by-case basis
- School/program must provide program objectives and curriculum
- School/program must provide proof of student liability insurance
- School/program must agree to use PMC’s standard affiliation agreement
- School/program must be within PMC’s primary service area (below zip codes):
  - 32780
  - 32796
  - 32926
  - 32927
  - 32754
- Students applying for an experience at PMC must reside in one of the above zip codes
- Single-student affiliation requests will not be considered
- Distance learning programs will not be considered

### **Application Process:**

- Review *Student Guidelines*
- If school/program meets above criteria and agrees to the information within PMC's *Student Guidelines*, they must submit a *PMC Affiliation Application* (link available at [www.parrishmed.com/students](http://www.parrishmed.com/students)).

### **Required application information includes:**

1. School name
2. Program name
3. School status (public, private, etc.)
4. School/program mailing address
5. Affiliation contact person (name, title, address, email, phone number)
6. Proof of program accreditation
7. Proof of student liability insurance
8. Reason for requesting affiliation with PMC
9. Program curriculum objectives
10. How long has the program been established?
11. How long has the program been accredited?
12. How many months/terms/credit hours is the program?
13. How many students are currently enrolled in the program?
14. How many students have graduated from the program?
15. What's percentage of students admitted to the program graduate?
16. What's the average time it takes students to graduate from the program?
17. What's the average GPA at graduation?
18. How many students currently enrolled in the program reside in our primary service area (zip codes 32780, 32796, 32926, 32927, 32754)?
19. How many students per term do you hope to place at PMC?
20. Is there any additional information that will be helpful during the review process?

### **Important to note:**

- Application must be received at least 12 weeks prior to the requested student placement date
- Please email all questions to [students@parrishmed.com](mailto:students@parrishmed.com)