

**California State University, San Bernardino
Preceptor Qualifications (Standard 7)**

Preceptor name (last, first, initial):

Preceptor employer:

Employer address:

Preceptor daytime phone:

Preceptor email:

Years preceptor has worked for this employer:

How many hours per week does this preceptor work for this employer?

Has this preceptor previously supervised students/interns?

Yes No

Preceptor's highest degree achieved:

Preceptor's professional credentials:

What licensure or professional certification is required for your role as a practitioner?

Check the rotations for this preceptor and facility:

Clinical Rotation

Foodservice Rotation

Community Rotation

Concentration Rotation

Other: _____

Other: _____

Describe continued competency (CPEs or other professional development) appropriate to precepting responsibilities in the past seven years:

Other Information:
