CLINICAL TIME LOG

STIIDENT PRECEPTOR SEMESTER/YEAR	CONTRACTOR OF THE CONTRACTOR O	DD E CEDE OD	CDI (DCMDD /VD AD
	STUDENT	PRECEPTOR	SEMESTER/YEAR

Date	Clinical Unit	Daily Hours	Cumulative Hours (Total 180 Hours)	Preceptor Feedback Requested/Received (Yes / No)	Preceptor Signature