

**Moses Cone Health System  
2009 Nurse Extern Program**

**CLINICAL PREFERENCE SHEET**

Name: \_\_\_\_\_

Please **rank your top three clinical areas of interest** and indicate scheduling needs:

**Cardiology / ICU**

- \_\_\_\_\_ 2000 (Heart Unit)
- \_\_\_\_\_ 2100 (Medical /Surgical ICU)
- \_\_\_\_\_ 2300 (Surgical ICU)
- \_\_\_\_\_ 2900 Coronary ICU / Stepdown
- \_\_\_\_\_ 3300 (Intermediate Care)
- \_\_\_\_\_ 3700 (Cardiac Progressive Care)
- \_\_\_\_\_ 4700 (Cardiac CHF)
- \_\_\_\_\_ ICU WL
- \_\_\_\_\_ 4East Telemetry WL
- \_\_\_\_\_ ICU APH
- \_\_\_\_\_ 2A APH

**Medical / Surgical**

- \_\_\_\_\_ 3000 (Neuroscience)
- \_\_\_\_\_ 3100 (Neurological ICU)
- \_\_\_\_\_ 4000 (Inpatient Rehabilitation)
- \_\_\_\_\_ 5000 (Orthopedics)
- \_\_\_\_\_ 5500 (Medical / Renal)
- \_\_\_\_\_ 6700 (Medical / Surgical / Telemetry)
- \_\_\_\_\_ 5 East (Orthopedics/ Bariatric) WL
- \_\_\_\_\_ 6 East (General Surgery) WL
- \_\_\_\_\_ Inpatient Oncology
- \_\_\_\_\_ 3A APH

**OB/GYN**

- \_\_\_\_\_ Women's Unit
- \_\_\_\_\_ Labor & Delivery
- \_\_\_\_\_ Mother / Baby
- \_\_\_\_\_ Adult ICU

**Pediatrics**

- \_\_\_\_\_ Pediatrics
- \_\_\_\_\_ Pediatric ICU
- \_\_\_\_\_ Neonatal ICU

**NOTE:**

- Shift schedules to be determined by unit preceptor schedule and could be **evening, night or rotating shifts.**
- We will make every effort to meet your clinical preference and scheduling needs; however, a specific schedule **cannot be guaranteed.**

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**APPLICATION SUPPLEMENT**

Name \_\_\_\_\_

School \_\_\_\_\_

Graduation Date (Month/Year) \_\_\_\_\_

**Please include the following with your application:**

- Copy of sealed transcript
- 3 clinical reference forms
- Completed Employment application - external candidates only
- Virtual Edge electronic transfer completed with attached resume-internal employees only

1. Will you be taking summer courses? \_\_\_\_\_ Yes \_\_\_\_\_ No

2. Do you have special scheduling needs? If yes, please explain.

Tell us why being a Nurse Extern is important to you. What experience do you hope to gain from this experience?

3. List any volunteer or other experiences related to nursing or healthcare.

4. List any honors, special accomplishments or additional information you wish for us to consider.