

**Children's Hospital of the King's Daughters
Norfolk, Virginia
Nursing Student Summer Extern Program Application Addendum**

NURSING COURSE SUMMARY

Name: _____

Please list all NURSING courses completed and those in which you are currently enrolled. Use the back of the form if necessary.

Course Title and Semester of Enrollment (e.g. Fall, 2001)	Brief description of course content. If the course included a clinical component, please include: <ul style="list-style-type: none"> • Type of agency and patient population (e.g. acute care vs. extended care, inpatient vs. outpatient, adults vs. pediatrics, etc.) • Type of nursing care provided • Estimated total number of clinical hours
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