

Health Screening and Physical Examination Approval Form



You will need to complete this form if you are coordinating a health screening or physical examination event in which students will participate. Completing this form and the required documentation for this event will enable you to provide medical assistance to your patients while ensuring students are covered by the university's medical malpractice insurance.

After completing the form, make a 15 minute appointment with either the [Office of University Student Affairs](#) or [COMP-Northwest Student Affairs](#). They will help you ensure you are prepared to tackle the event and will sign off on the approval form once all is in order. **Submit this form no less than one week before your scheduled event.**

CONTACT INFORMATION

Name of Community Organization (e.g. Garfield Elementary School):	
Community Organization Contact (e.g. Joe Smith, Teacher):	
Community Organization Contact's Email or Phone #:	
WesternU Event Coordinator's Name:	
WesternU Event Coordinator's Phone #:	
WesternU Class/Club/College Sponsoring the Event:	

EVENT INFORMATION

Event Date:		Start Time:		End Time:	
Address:					
Anticipated Number of Patients We Will Serve:					
Anticipated Age Group of Patients We Will Serve (check all that apply):	Adults	<input type="checkbox"/>	Children	<input type="checkbox"/>	
Anticipated Primary Language(s) of Patients:					
Procedures Offered (e.g. glucose scans & physical exams):					
WesternU Health Professional Overseeing Procedures:					

- Must be a WesternU faculty/preceptor & credentialed to oversee the procedures above (Ask your club advisor first. If you do not have a club advisor, or they cannot oversee the event, ask your faculty member of choice and confirm their participation before submitting this form)

REQUIRED DOCUMENTATION FOR THIS EVENT:

- WesternU Participants List:** Have all student participants and your WesternU Health Professional print and sign their name on the WesternU Participant List as they arrive at the event.
- Patient Waiver Forms:** Have all patients sign a Patient Waiver Form. If serving children under 18, the parent/guardian must sign the form instead of the patient before services are provided.
- Patient's Copy of Screening Results Form** (optional): Indicate the results of each patient's screening on the Patient Screening Results Form. At the end of the consultation give the completed form to the patient for their records.

Items 1 and 2 must be returned to the Office of University Student Affairs (Student Services Center) or COMP-Northwest Student Affairs (Room 246) no more than one week following the event.

Once approved and signed, we will provide you and your WesternU Health Professional with an electronic copy of this document, as it will help them know what to expect the day of the event.

Best of luck!

Student Affairs Officer Signature

Initials & Date