INFORMATION SHEET FOR THE NURSING SCHOOL

Date of issue _____

Name of the School _____

At the point of graduate (Date: _____)

1. Establisher	National Public Private			2. Date of Foundation		
3. No. of Faculty Members (Nursing Division) Medical Science Nursing	Professor Total ( )		Associate Professor Total ( )		Lecturor Total ( )	
	Full time	Part time	Full time	Part time	Full time	Part time

4. No. of Students	No. of authorized intake	No. of total students in nursing program

5. Facilities	Library exist not exist Total No. of books (for nursing program)
	Clinical Lab Room exist not exist Total area ㎡ No. of Students per bed Home Health Clinical Lab exist not exist
	No. of classrooms (for nursing program) Computer Lab exist not exist

6. Clinical Practicum Facilities ※ Nursing staff includes only RN and LPN/LVN ※ Please fill in all the facilities if the applicant has taken integrated curriculum with nurse curriculum. If not, only bottommost facility (Main Community of Public Health Nursing) needs to be filled in.	Main Hospital of Fundamental & Adult (Med/Surg) Nursing 　Name of the Hospital: 　No. of Beds No. of Nursing Staff 　Preceptors for Students exist not exist 　Preparation of Nursing Protocols/manuals exist not exist
	Main Home-Care Agency 　Name of the Agency 　Total Home-Visits per month No. of Nurses
	Main Facility of Gerontological Nursing 　Name of the Facility 　Total No. of Residents No. of Nurses
	Main Facility of Pediatric Nursing (Floor-base) 　Name of the Facility 　Average No. of Pediatric Patients per a day No. of Nurses
	Main Facility of Maternal Nursing (Floor-base) 　Name of the Facility 　Average No. of Delivery per a year No. of Nurses
	Main Facility of Psychiatric Nursing (Floor-base) 　Name of the Facility 　Total No. of Beds No. of Nurses
	Main Community of Public Health Nursing 　Name of community 　No. of Public Health Nurses

Signature _____