

Observational Job Shadowing Application

What is an Observational Job Shadow?

- Observational Job Shadowing gives individuals an opportunity to spend a **maximum of 40 hours** with a hospital employee or Credentialed Physician/Midwife so they can gain a better understanding about a particular profession or occupation.
- The purpose of the experience may include, but is not limited to assist in career choices, to fulfill requirements for entrance into a recognized educational program, or for exposure to the Canadian Health Care system for foreign trained health care professionals.
- Is strictly observational with **no** hands-on patient care or patient activities.
- Requires explicit permission from patients to be present for care-related activities. Patients have the right to refuse this observation.
- Observational Job Shadows with Physicians must be pre-arranged prior to applying.

An observational job shadow is **not** for individuals who:

- Are under the age of 16
- Are current employees of SJHH
- Fit the criteria of the SJHH Volunteer Services
- Require a job shadow experience for completion of a recognized educational program from a university, college, high school or training institution
- Require an evaluation component of their visit by our staff

If you meet the criteria, submit this completed form a minimum of **4-6 weeks** prior to your requested start date to VPEducationOffice@stjosham.on.ca.

Once this application is reviewed you will be informed of progress and next steps.

Applicant Information

Name	Click here to enter text.
Are you 16 years old or older? <input type="checkbox"/>	
Email Address	Click here to enter text.
Phone Number	Click here to enter text.
Emergency contact	Name Click here to enter text. Phone number Click here to enter text.

Observational Job Shadow Information *(Please ensure this section is completed with as much detail as possible.)*

What role would you like to shadow?

[Click here to enter text.](#)

Requested clinical area and site: [Click here to enter text.](#)

Requested dates for observation

Start Date [Click here to enter a date.](#) **End Date** [Click here to enter a date.](#)

Days and times available

[Click here to enter text.](#)

Detailed description of learning goals for the job shadow experience: *If you need additional space to list your learning goals, please attach a separate word document.*

[Click here to enter text.](#)