

### **Shadowing Form**

## **Cardiovascular Perfusion Program**

#### Overview

Thank you for your interest in the Cleveland Clinic School of Health Professions Cardiovascular Perfusion Program. We appreciate you considering Cleveland Clinic for your future education.

Applicants of this program are required to complete a minimum of one open heart procedure observation. This experience must be completed in order for your application to be reviewed.

#### Instructions

Facility.

Please complete the shadowing experience table below, collect the signature of the Certified Clinical Perfusionist (CCP) who has provided your shadowing experience, and upload the form to your document portal in the student information system, Campus Café.

**Date of Experience:** 

# **Shadowing Experience**

**Applicant Name:** 

Procedure observed: Surgeon: Certified Clinical Perfusionist (CCP):			
		Briefly describe your experience:	
Certified Clinical Perfusionist Verification			
I certify that the above-named applicant has completed	d the shadowing experience as listed above.		
CCP Signature:	Date:		