COLLEGE of NURSING
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Please visit chamberlain.edu/locations for location specific address, phone and fax information .

DNP PRACTICUM READINESS FORM

SECTION I:

Please type your responses to all questions. ***Note: scanned or handwritten submissions will not be accepted.***

Student Name: [redacted]

Student ID (D#): D40x85xx9

Email: mxlxtoxyax5@yahoo.com

Phone: 9x0-5x4-17x9

Address: 115 Plaxxxtion Drive Swxnsxoro NC 2x5x4

☑ I fully understand I cannot collect any data and/or implement my project at the practicum site until my proposal is approved and I have received all required permission(s) from Chamberlain's Institutional Review Board (IRB) as well as the practicum site's IRB (if applicable)

Working Project Title: 1 The impacts of Telephonic Health Coaching Intervention (THC) toolkit on obesity patients

Practicum Site/Organization Name: Crossroads Treatment Center

Practicum Site Contact Person:
Name, email address, phone
Dawn xenxinsxJenkins@cxrolixaeastxealxh.com 2x2-6x3-8x62

Preceptor Contact Information:
Name, credentials, email address, phone
Daniella Thomas PMHNP, DNP, MSN-ED, RN, CMSRN, dannimxxxx8@gmail.com 9x0-5x5-75x5

Mentor Contact Information:
Name, credentials, email address, phone
N/A

Practicum Site Key Decision Maker(s) Contact Information:
Name, credentials, email address, phone
Dawn Jenkins DJenkins@caxolxnaexsthxalth.com 2x2-6x3-8x62

Date(s) you spoke to Practicum Site Key Decision Maker(s): [redacted]

After you communicated with the practicum site decision maker(s), what issue/problem did they state they want you to work on as part of your DNP practicum?

How to integrate Intensive Behavioral Therapy (IBT) programs on obesity patients for weight 2

Do you have a letter of support for your proposed project? Note: this must be obtained before starting NR-702 and be communicated via the practicum site's letterhead, as well as signed by the decision-maker. Please refer to the Resources section within your course for a sample letter

☐ Yes ☑ No Comments 3

Select if your project is using a translational science model or a theoretical framework and change model. Identify the model used.

☑ Translation Science Model: Knowledge to Action (KTA)

☐ Framework/Change model:

Summary of Comments on Edited PopeDNP Practicum Readiness form-1.pdf

DNP PRACTICUM READINESS FORM

Number: 1 Author: mclay2 Subject: Comment on Text Date: 2/14/2024 8:58:45 AM
This does not match your project

Number: 2 Author: mclay2 Subject: Sticky Note Date: 2/14/2024 8:59:11
This needs to describe the conversation had with stakeholders

Number: 3 Author: mclay2 Subject: Sticky Note Date: 2/14/2024 8:59:33
Must state will receive prior to NR 702