

Clinical Skills and Simulation Center

Student Interest Group Session Request Form

Dear Student Leader: Thank you for your interest in using the Simulation Center as part of your Student Interest Group activities; we are happy to support your initiatives. A few guidelines to requesting space within the Center:

- First come, first served. Space, time, and equipment is limited; requests are considered in the order received.
- Deadline to submit the form: September 15, 2023. Requests received after this date will not be considered. Requests *MUST* be received at least one month prior to the desired date of the event.
- This form should be filled out for any new or repeating sessions.
- Complete all areas of this form and return it to: COMCSSC@ucf.edu. Use this email for any communication.
- A meeting will be scheduled with the Director of Clinical Skills and Simulation Center among others to develop the program and ensure we can meet the goals of the program. This meeting should include the requesting student leader and the faculty advisor whenever possible.

Student Interest Group Name: _____

Requestor Name: _____ Email: _____

Faculty Advisor Name: _____ Email: _____

Anticipated Attendance Number: _____

Proposed Dates & Times (include at least 3 possible dates in order of preference):

_____	_____
_____	_____
_____	_____
_____	_____

Write three proposed objectives: Complete the sentence, "At the end of this session, the learner will be able to..."

1. _____
2. _____
3. _____

Use this space to describe idea for the session. Include a case description, anticipated equipment needed (e.g. High fidelity manikin, standardized patient, part task trainers)