

Washington State Health Professional Scholarship Program
QUARTERLY SERVICE CONFIRMATION FORM INSTRUCTIONS

PART A: Recipient Information (*Submit a separate form for each facility you work at.*)

Recipient:

- Should identify the quarter that was just completed.
- Must indicate if this form is for initial employment upon completing their academic program (this form will be the first one submitted for service credit). Must submit job description.
- Must indicate if they have changed employers. Must submit job description.
- Must work a minimum of 24 hours per week. (*For those who started their service obligation before July 1, 2009, and if pre-approved, participant may work a minimum of 20 hours per week.*)
- Certifies by their signature they have worked at the facility identified on the form.
- Must sign and date the form on or after the last day of the quarter and before submitting the form to the administrator to complete.
- For Faculty, you must be teaching undergraduate nursing and report only those hours on the form.

PART B: Facility Information and Certification (To be completed by the facility administrator)

Facility administrator:

- Is responsible for recording, reviewing and certifying the actual hours worked for the quarter at this facility. A separate form must be submitted for each facility the recipient works at.
- Must record the beginning and ending dates of any extended leave (*more than two weeks*) during the quarter, along with an explanation for the leave.
- Is required to keep a copy of the form in their files. *When program staff performs facility visits, these forms will be reviewed and compared to copies the office received.*
- Should complete/sign/date the form after the participant's signature/date.
- Is responsible to fax or mail the form to our office. Fax: (360) 704-6242
- For Faculty, include only the hours spent teaching undergraduate nursing.

Additional Employer Requirements:

For the participant to be eligible your site must meet the following criteria:

- Must have a caseload of 40 percent or more Medicaid/Medicare.
- Must have a posted and implemented a sliding fee discount schedule for patients
- Must be providing primary care – not specialty care (i.e. dialysis, drug treatment, orthopedics, etc.)
- Must have hired the participant as a permanent employee of your organization – not working per diem or on a contractual basis.
- Must not be an urban hospital, an urgent care/walk-in clinic or a free clinic.
- Must not have hired participant as a public health nurse.
- Must not have hired participant to work in an administrative position.

PART C: Program Information

- Forms should be mailed or faxed within 14 days after the end of the completed quarter.
- You are required to contact the program immediately if there is any change to your employment status. *Failure to do so may cause your account to go into default and require repayment of all program funds disbursed.*

Definition of "full time" employment: For all health professionals, except as noted below: *At least 32 hours of the minimum 40 hours per week are/will be spent providing direct outpatient care during normally scheduled clinic hours in the ambulatory care office(s) specified above. The remaining 8 hours per week is/will be spent providing clinical services to patients in the above offices, performing clinical support activities in alternate locations as directed by the above site(s), or performing practice-related administrative activities.*

For OB/GYNs, FPs practicing OB on a regular basis, providers of geriatric services, certified nurse midwives, and pediatric dentists health providers: *At least 21 of the minimum 40 hours per week are/will be spent providing direct outpatient care during normally scheduled clinic hours in the ambulatory care office(s) specified above. The remaining 19 hours per week is/will be spent providing clinical services to patients in the above offices, performing clinical support activities in alternate locations as directed by the above site(s), or performing practice-related administrative activities (with practice-related administrative activities not to exceed 8 hours per week).*

For Faculty:

Hours you can report for service credit are those hours spent in classroom or clinical for undergraduate nursing students. Do not include hours teaching graduate level classes. Use program quarters – not academic quarters for reporting purposes.