Correctional Health Services

Registry Exemption Sign-In/Out Form

Payment may be delayed by not using the electronic sign-in/sign-out procedure



Name:		Title:						
		Times must be entered as Military Time						
Date Worked <u>:</u>	Military Time In:	Military Tim			e out:			
Registry Name:								
Advanced Nursing - P/T	Fa	vorite Healthcare P/T	MGA HIt	MGA HIthcare P/T		(PRCS)Prof Respir Care P/1		
AtWork Staffing - P/T	Hea	alth Providers Choice - T	Nurse	NurseCore - P		Supplemental HC Travel		
AZ Nurses Choice- P		Health Temp - P	Nursing Ce	Nursing Centers / NCI -P		Supplemental HC Perdeim		
Capability P		egrated Healthcare P/T	Nurse Finders Perdeim			Travel Nurse America - T		
Concentric Hlthcare P/T	Inte	rim Healthcare (AGK) P					Westways-P	
CNS- Critical Nursing P		Kelly Healthcare- P				Other:		
Curastat, Inc P/T		Maxim P	Prof Psych Staffing P					
			NURSING G	GROUP-	5			
P= Perdiem	T= T	raveler						
		1-						
Clinic Name (Please circle appropr		-	0000 1			0.07	411 A 1 - 1	
2612 Durango	2632	Towers OP	2665 LBJ D				4th Ave Intake	
2622 Estrella	2662	LBJ OP	2666 LBJ R				4th Ave Radiology	
2623 Estrella Dental	2663	LBJ MHU	2672 4th Av			2610	Classrm orientation	
2625 Estrella Supoort	2664	LBJ Infirmary	2673 4th Av	e Dental				
Exemptions should only be use App Reason for non use of electro	roval or	Profile is not entered, a	-		-	ng!	puter down, Overshif	
Did not know/follow proced			ing or olinio orror		*Now			
Clocked into Wrong Clinic		Forgot to Sign In	ravel Time-Staffing or clinic error			*New employee/profile entered *Prof Inactive/Mandatories exp- Agency		
Computer down-Staffing notified			Forgot to Sign Out			Notified		
			Classroom (initial) Orientation-					
**Late call - MUST still use sign in upon arrival!			100% Agency Responsibility			**Profile Updated / Active		
Name not on the list- New?			Additional Orientation (Classroom			Profile Active - Reason Unknown;		
Profile not current?			or Clinical)- up to 24hrs @ 70%			should be able to sign in		
Delayed by Security- MUST Still			Transferred to Another Facility-Where?			Other Instructions/notes:		
use sign in	••••		-		Ŭ			
No Lunch-N.S. MUST appro	ove	When? Sho	<u>uld use sign in ou</u>	<u>t</u>				
please - initial		procedure						
*** Exemption form shoul calls, Delayed by security			,	ot able to	initially;	; try again	i soon after. Late	
Your Signature:			Date:					
Verification:			Date:					
Nurse Supervisor:			Date:					
OT Authorized YN			Signature:					
Over Shift Authorized Y	N							
Staffing Verification:			Date:					
Send ORIGINAL with signal Send ORIGINAL with signal Mus	T BE SI	es (FAXES NOT ACC GNED BY A NURSE SUP ng will forward to CHS A	PERVISOR TO BE F	PROCES	SED	Approva	l –	

U:\Forms\MISC\Exemption form eff Aug 27 2012.xls