



# NAACLS Self-Study Template

## Affiliates Additional Page

**Standard I.B.2.f and I.B.3-5:** Attach items for affiliate information in gray areas in the following table. See the Standards Compliance Guide for specific requirements.

Please clearly indicate when multiple agencies are covered under one affiliation/partnership agreement, or policy. To ensure no errors when reviewing documents, please be consistent and complete when using names of affiliates/partners on documents submitted.

<b>Affiliate (Name, City and State)</b>  <i>Check if Clinical/ Applied Learning (C) or Academic (A)</i>		Current, Signed Affiliation Agreement or MOU (I.B.5)  <input type="checkbox"/> N/A (hospital- based programs only)	Completed Clinical / Applied Learning Affiliate Facility Fact Sheet (I.B.4)	Documentation that Assigned Activities are Educational (I.B.2.f)	Site Specific Objectives, Evals, Unique Rules and Policies (I.B.2.f), as applicable	Examples of ongoing Communication between Sponsor and Affiliate (I.B.3)  <input type="checkbox"/> N/A (hospital-based programs only)
<input type="checkbox"/> C					<input type="checkbox"/> NA	
<input type="checkbox"/> A						
<input type="checkbox"/> C					<input type="checkbox"/> NA	
<input type="checkbox"/> A						
<input type="checkbox"/> C					<input type="checkbox"/> NA	
<input type="checkbox"/> A						
<input type="checkbox"/> C					<input type="checkbox"/> NA	
<input type="checkbox"/> A						
<input type="checkbox"/> C					<input type="checkbox"/> NA	
<input type="checkbox"/> A						
<input type="checkbox"/> C					<input type="checkbox"/> NA	
<input type="checkbox"/> A						
<input type="checkbox"/> C					<input type="checkbox"/> NA	
<input type="checkbox"/> A						
<input type="checkbox"/> C					<input type="checkbox"/> NA	
<input type="checkbox"/> A						
<input type="checkbox"/> C					<input type="checkbox"/> NA	
<input type="checkbox"/> A						
<input type="checkbox"/> C					<input type="checkbox"/> NA	
<input type="checkbox"/> A						
<input type="checkbox"/> C					<input type="checkbox"/> NA	
<input type="checkbox"/> A						
<input type="checkbox"/> C					<input type="checkbox"/> NA	
<input type="checkbox"/> A						