

## Instructions for Completing the Affiliation Commitment Form

**Thank you** for your time and willingness to participate in the clinical education programs represented by IACCC. **Please note that the slots designated on this form are considered a commitment to our programs. A letter will be sent in the fall confirming your slots. “Thank you but no” letters will be sent by each program one month before the affiliation – please do not give confirmed slots away.**

Please read the following instructions carefully as they are designed to simplify the affiliation commitment form.

### Column headings:

1. **Rotation # and start Dates:** The year is divided into 8 six week Rotation periods. The starting dates for each Rotation are listed in column one.
2. **Academic Program:** This column lists the names of the Programs that are asking for slots in a specific Rotation.
3. **Affiliation number of weeks, Differing start dates, & Program Guidelines for Setting or Type:** This Column lists the number of weeks an affiliation will be for each Program and the **start date if different** from the start date of the Rotation start date. We have added “Program Guidelines” for Programs that have specific needs during that Rotation. *If no specific guidelines are given the Program is able to use “any setting”*
4. **Affiliation Sequence:** This column gives the academic level number of this affiliation.
5. **Pre-assigned Slots, Setting & Type:** Designate the number of slots that you wish to assign to a specific Program for each Rotation period. Give the **Setting:** IP, OP, Mixed if both IP and OP, Home Health, TCU, Subacute, etc. **Type** refers to Ortho, Neuro, Acute, Rehab, Cardiac, Peds, etc.
6. **Open Slots:** Designate the number of slots you have available **in each Rotation period** that you will allow to be assigned through IACCC to **any Program. Interested Programs draw for these slots. Please give Setting and Type** as defined in Pre-assigned column.
7. **Comments:** Any special instructions, i.e., minimum length of affiliation; PT or PTA student only, No trades, etc. Specify location if at a different site.

**Please note:** Affiliations longer than six weeks will overlap through the following six-week Rotation period. If a school needing the longer affiliation selects an open slot and the resulting overlap reduces the available slots in your facility for the next rotation period, please indicate this by stating in the ‘Comments’ box, **“If longer, one less slot next rotation.”**

IACCC reserves the right to trade slots among schools. If you do not wish such trades, please state in the Comments box, **“No Trades.”**

Note that pre-affiliation rotations are not listed on the form and are arranged by the schools individually. However, a list of pre-affiliation dates is provided as a reference to the total number of clinical spots that will be requested throughout the year. All schools continue to have great difficulty in filling their pre-affiliation needs. Please remember to give consideration to pre-affiliation as well as affiliation students.

Please complete the IACCC AFFILIATION COMMITMENT FORM and **return it by April 30, 2007** in the enclosed envelope or by FAX. If you have any questions in completing this form, please contact:

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**Thank you for your continued support of the  
PT and PTA educational programs in Southern California!**