

Job Shadows

Thank you for your interest in learning more about the life-changing work we do here at Saint Alphonsus. We are pleased to support career development and expansion by providing job shadow opportunities. In order to provide a quality experience for all, we consider and prioritize job shadow requests based on the following:

- Purpose/Need of the job shadow
- Potential impact to patient care and/or daily operations
- Available resources within the desired department and location

REQUIREMENTS

- As the observer, you are responsible for identifying and connecting with a Saint Alphonsus colleague to secure a job shadow experience.
- Job shadows may be conducted for **up to 2 days**, in no more than **4-hour time blocks**. These days should be within the same week, unless otherwise requested by provider.
- You must submit a fully completed application at least 2 weeks prior to the desired date of the job shadow. If you are under the age of 18, you must provide signed, written consent from a parent.
- You will be required to sign a Confidentiality Agreement and provide proof of the following:
 - A **negative** TB test within the last 12 months (waived for Trinity/Saint Alphonsus employees).
 - Covid vaccination **or** a completed medical exemption or declination form
 - Flu Vaccine **or** a completed medical exemption, or declination (*if observing between November 1st through March 30th*)

Please note that all documents must be submitted in JPG or PDF form. Saint Alphonsus is not responsible for any associated vaccines costs

If you need assistance receiving vaccines or TB test (or accessing your vaccination records):

- Idaho: [Immunizations - Central District Health \(idaho.gov\)](https://idaho.gov)
- Baker City: [Baker County-Health Department \(bakercountyor.gov\)](https://bakercountyor.gov)
- Ontario: [Oregon Health Authority : Vaccine Access Program \(VAP\) Overview : Vaccines for Children Program \(VFC\) : State of Oregon](https://oregon.gov)
- These entities **may be** able to offer discounted vaccinations/TB test based on age/income/insurance of inquiring observer

Saint Alphonsus Job Shadow Inquiry Form

Applicant (Observer) Information	Name			
	Phone Number			
	Email			
	Name of school (if applicable)			
	Are you under the age of 18?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, please provide date of birth	

Job Shadow Information	Name of Colleague Being Observed			
	Position / Department			
	Location			
	Desired Date(s) of Shadow			

Purpose/Need	
Why are you interested in job shadowing at Saint Alphonsus?	
Is there anything in particular you are hoping to see or learn about the job you plan to observe?	

Please submit the completed form to careers@saintalphonsus.org. If your job shadow request is approved, your information will be forwarded to our Clinical Observation team for final review and clearance. You will receive an email to inform you of the next steps when you are officially cleared to complete your observation.