



**JOHNSTON
COMMUNITY
— COLLEGE —**

Mammography Clinical Affiliate Sponsor Form

Applicant Name _____

The above listed applicant will need 15 hours of clinical experience in mammography per week in the spring semester. This semester will start in January and end in May. As a representative of this facility, we are willing to sign an affiliate contract with Johnston Community College, and allow the above named student to complete mammography clinical experiences in our facility.

Facility Name _____

Facility Street Address _____

Facility Mailing Address _____

City _____ State _____ Zip Code _____

Contact Name for Facility Affiliate Agreement _____

Contact Phone number _____

Facility Representative Printed Name _____

Facility Representative Signature _____

Date _____