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## First Day Travel Nurse Checklist

<b>Hospital Name</b>	
<b>Hospital Address, City, State</b>	
<b>Hospital Phone</b>	
<b>Hospital Emergency Contact Information</b>	
<b>Manager/Supervisor</b>	
<b>Date/Time</b>	
<b>Location of Unit</b>	
<b>Dress Code for first day</b>	
<b>Scrub Color/are they provided</b>	
<b>Testing at hospital</b>	
<b>Documents to bring on first day</b>	
<b>Parking Information</b>	
<b>Orientation/First week's schedule</b>	
<b>Hours guaranteed during first week</b>	
<b>Housing Address, City, State</b>	
<b>Housing Contact Information and Phone</b>	
(add your own)	
(add your own)	
(add your own)	