



SOUTH DAKOTA BOARD OF CERTIFIED PROFESSIONAL MIDWIVES

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Home Page: doh.sd.gov/boards/midwives/

Student Midwife Provisional License and Preceptor Agreement

PRECEPTOR

STUDENT MIDWIFE

NAME: _____

NAME: _____

EMAIL: _____

EMAIL: _____

ADDRESS: _____

ADDRESS: _____

PHONE: _____

PHONE: _____

STUDENT SCHOOL OF ENROLLMENT _____

We understand and agree to abide by the following guidelines:

- Midwifery practice shall not be permitted, until this Preceptor Agreement has been approved by the Board.
- The Provisional Licensee shall only provide services under the ongoing direct supervision of the Board approved preceptor.
- The Provisional Licensed Student Midwife shall adhere to the South Dakota statutes 36-9C-1 through 36-9C-37, and the Administrative Rules promulgated by the Board.
- The Preceptor and the Provisional Licensed Student Midwife shall provide full disclosure of the supervised nature of their work to every client before or during the first appointment.
- The Preceptor shall not allow the Provisional Licensed Student Midwife to provide student midwifery services independently of their Preceptor.
- The Preceptor shall keep records verifying the training and evaluation of the Provisional Licensed Student Midwife, including the precise nature of services rendered.
- The Preceptor shall be identified on all reports and correspondence of a professional nature, excluding disciplinary correspondence with the Board.
- The Preceptor assumes professional and ethical responsibility and may be sanctioned by the Board for all acts and omissions of the Provisional Licensed Student Midwife within the scope of the supervision.

PRECEPTOR

STUDENT MIDWIFE

Signature Date Signature Date

Any changes in preceptorship shall be submitted to the Board for approval within ten (10) days of the change.
The signed agreement must be mailed to the Board with the \$500 Student Licensure Fee.

Effective Date of Agreement: _____ Board Representative: _____