

CLEVELAND AMBULATORY SERVICES

**DELINEATION OF CLINICAL PRIVILEGES
Allied Health Professionals**

Applicant:	Date
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The granting, reviewing and changing of allied health professional's privileges will be in accordance with the Medical Staff Bylaws. Assignment of such privileges will be based upon documentation of individual's education, clinical training, demonstrated skills and supervising physician's requests.

Indicate procedures for which you wish to be credentialed. Return this form with your Application.

Procedures	Credentialing Request	
	Yes	No

Applicant's Signature:	Date
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Supervising Physician's Signature:	Date
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