



Clinical Evaluations: Student Evaluation of Site

Semester/Year (ex: fall 2013): _____

Course (ex: GNUR 0000 Course Title): _____

Institution or clinical agency: _____

Unit (Example: 6 East): _____

Clinical Faculty: _____

Preceptor (write N/A if not a precepted experience): _____

Please check the appropriate box using the five-point Likert scale.

	Never	Rarely	Sometimes	Often	Always
Appropriate patient situations were available for my learning needs.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I was able to give "hands-on" care as appropriate.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I was able to obtain needed information from the patient record and staff.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The staff was supportive of my needs.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I felt like a part of the healthcare team.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I was able to get involved in unplanned learning experiences.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I received an adequate orientation to the physical environment of the unit and medical center.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I was given adequate information to enable me to be a general resource for patients and family.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I was able to meet my learning needs on this unit.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Was there a staff member that you would like to name who was especially helpful to you? Please consider expressing any appreciation in specific ways and include names whenever possible. Thank you for your feedback.

How could the experience be improved? Continue on the reverse if needed.

Thank you for your feedback.