Experience Log Sheet

Course________________________________________________________
Student Name_____________________________________________________
Student’s main responsibilities at site__________________________________

Name of Site and Contact Person_____________________________________
Phone number__________________________ and/or Email Address__________
*The contact person must list the times the student was at the site and sign to authenticate the log sheet.

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<th>Date</th>
<th>Time in</th>
<th>Time out</th>
<th># of hours</th>
<th>Signature (required)</th>
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Total hours
Student Name: ____________________________________________________________

Supervisor Name: _________________________________________________________

Position: ________________________________________________________________

Contact information (phone or email): _______________________________________

Primary supervisor to complete:

1. Was the student’s attendance and punctuality appropriate?
   - Always
   - Mostly
   - Sometimes
   - Rarely
   - Never

2. Did the student maintain a professional appearance?
   - Always
   - Mostly
   - Sometimes
   - Rarely
   - Never

3. Did the student demonstrate initiative?
   - Always
   - Mostly
   - Sometimes
   - Rarely
   - Never

4. Did the student demonstrate strong work habits?
   - Always
   - Mostly
   - Sometimes
   - Rarely
   - Never

5. Did the student understand and respect his/her limitations?
   - Always
   - Mostly
   - Sometimes
   - Rarely
   - Never

6. How was the student’s rapport and respectful interactions with patients?
   - Excellent
   - Very Good
   - Good
   - Fair
   - Poor

7. How was the student’s rapport and respectful interactions with clinicians and staff?
   - Excellent
   - Very Good
   - Good
   - Fair
   - Poor

8. How was the student’s overall performance?
   - Excellent
   - Very Good
   - Good
   - Fair
   - Poor

What were the student’s top two strengths?

1. 

2. 

What two areas should the student continue to work on/improve upon?

1. 

2. 

Additional Comments: