

# Week Five Fieldwork Activity Sheet

Student Name: \_\_\_\_\_

Clinical Site: \_\_\_\_\_

Total hours for week five: \_\_\_\_\_

## Overall Performance Rating

- 4 - Exceeds Standards.** Performance is highly skilled and self-initiated. This rating is **rarely given** and **would represent the top 5% of all the students** you have supervised.
- 3 - Meets Standards.** Performance is consistent with **entry-level** practice. This rating is **infrequently given at midterm** and is a **strong rating at final**.
- 2 - Needs Improvement.** Performance is **progressing but** still needs improvement for entry-level practice. This is a **realistic rating of performance at midterm** and some ratings of 2 may be reasonable at the final.
- 1 - Unsatisfactory.** Performance is **below standards** and requires development for entry-level practice. This rating is given when **there is a concern about performance**.

**\*\*Half points may be awarded if necessary\*\***

\_\_\_\_\_ Assist in re-evaluation

\_\_\_\_\_ Assist in establishment of goals/ update of current goals

\_\_\_\_\_ Treatment implementation/ justification of 4-6 clients with minimal supervision

\_\_\_\_\_ Documentation for all assigned clients

Type of note completed: Progress, daily, discharge, evaluation, and re-evaluation

\_\_\_\_\_ Student initiation of learning experience

\_\_\_\_\_ Safety of self and client (gait belt, w/c, t/f tech, obs. of client & environment)

\_\_\_\_\_ Professional behavior (timely, organized, professional dress)

\_\_\_\_\_ Interaction with other professionals and clients

\_\_\_\_\_ Time management/ treatment time management/ flexibility

Student Signature: \_\_\_\_\_

Fieldwork Educator Signature: \_\_\_\_\_

**Please fax at the end of the week to 618-942-6658 with Attention: Maegan King**