

## FACULTY EVALUATION of CLINICAL SITE/PRECEPTOR EXPERIENCE and COMMUNICATION FORM

COURSE # \_\_\_\_\_

SEMESTER/YEAR \_\_\_\_\_

STUDENT NAME \_\_\_\_\_

PRECEPTOR/SITE \_\_\_\_\_

DEMOGRAPHIC OF SITE \_\_\_\_\_

	Strongly Disagree 1	Disagree 2	Neutral 3	Agree 4	Strongly Agree 5
<b>The Preceptor</b>					
Provided a patient population relevant to student learning needs					
Provided nursing care relevant to clinical objectives					
Facilitated student accomplishment of clinical objectives					
Involved student as a member of the interdisciplinary team					
Maintains open lines of communication with faculty					
Completes student evaluation as requested					
Provided an overall quality learning experience appropriate to the student					
<b>The Clinical Facility/Experience</b>					
Provided opportunities to meet the educational and program objectives					
Provided physical space to accommodate student learning					
Provided employees who helped students meet course objectives					
Was a beneficial experience for the student					
Was a clinical experience worth recommending for future students					

Contact Date	Method of Communication	Discussion notes

Do the documents uploaded into Blackboard by the student reflect the evaluation of the preceptor? \_\_\_\_ Yes \_\_\_\_ No

**Comments:**

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**Faculty Signature/Date**