

**FORM C:
Preceptor's Evaluation**

Student name _____

Instructions to the student:

Complete the mailing information for your departmental advisor below, and submit this evaluation for to your preceptor **at the end of your field placement.**

Your preceptor will mail this completed form to:

Faculty advisor name _____

Department _____

University: _____

Address: _____

City, State, ZIP: _____

Instructions to the preceptor:

Please complete this multi-page evaluation form and discuss the results with the student. Mail the signed original or scan and email to the student's advisor at the address above.

(see next page)

PART I. Preceptor evaluation of student's performance.

Date _____

Student _____

Preceptor (rater/grader) _____

Agency _____

Unit or Department _____

Phone & email _____

Please rate the student according to the following numerical scale:

5- Excellent

3- Satisfactory

1- Unsatisfactory

4- Above Average

2- Needs Improvement

<i>Performance Standards and Criteria:</i>	5 Excellent	4 Above Average	3 Satisfactory	2 Needs Improvement	1 Unsatisfactory
<i>Initiative:</i> Degree to which the student can be relied upon to do the job without close supervision.					
Comments:					
<i>Quality of work:</i> Freedom from errors and mistakes; accuracy; consistency with the field placement objectives and the job description.	5 Excellent	4 Above Average	3 Satisfactory	2 Needs Improvement	1 Unsatisfactory
Comments:					

Quantity of work: Work output relative to staff in comparable jobs.	5 Excellent	4 Above Average	3 Satisfactory	2 Needs Improvement	1 Unsatisfactory
Comments:					
Job knowledge: Appropriate background knowledge of job-related behaviors, techniques, skills, and procedures to perform effectively.	5 Excellent	4 Above Average	3 Satisfactory	2 Needs Improvement	1 Unsatisfactory
Comments:					
Application: Application of formal educational preparation to the practice setting.	5 Excellent	4 Above Average	3 Satisfactory	2 Needs Improvement	1 Unsatisfactory
Comments:					
Cooperation: Willingness to work harmoniously with others in getting jobs done. Readiness to observe and conform to the policies of the agency.	5 Excellent	4 Above Average	3 Satisfactory	2 Needs Improvement	1 Unsatisfactory
Comments:					

Dependability: Compliance with deadlines and standards of performance.	5 Excellent	4 Above Average	3 Satisfactory	2 Needs Improvement	1 Unsatisfactory
---	-----------------------	---------------------------	--------------------------	-------------------------------	----------------------------

Comments:

Attendance: Punctuality, including daily arrival and departure at scheduled times; absent only for a good cause.	5 Excellent	4 Above Average	3 Satisfactory	2 Needs Improvement	1 Unsatisfactory
---	-----------------------	---------------------------	--------------------------	-------------------------------	----------------------------

Comments:

Additional preceptor comments:

SIGNATURE

Preceptor _____ **Date** _____

PART II. Preceptor/Agency evaluation of field placement experience.

1. Please use the scale provided below to indicate how much you agree with the following statements about the field placement experience (1 = completely disagree, 5 = completely agree).

	1 Completely disagree	2 Somewhat Disagree	3 Neutral	4 Somewhat agree	5 Completely agree
The student's learning objectives were met by the placement/ project					
During the placement, the student performed work that was valuable to the host organization					
The experience the student gained in the placement is relevant to a career in public health					
Overall, my role in supervising this student in the placement was satisfying					
I would be willing to supervise another student in a field placement					
My agency benefitted from the placement					
I would recommend the Placement Program to other agencies					
The process to be a placement agency was easy to navigate					
I felt supported by the SCPHTC central office and staff					
*I am willing to participate in a brief interview about the experience					

2. Please describe how your organization benefited from the Field Placement Program.

3. How could we improve the Field Placement Program for host agencies?

SIGNATURE

Preceptor _____

_____ Date