Instructions: This form is to be completed by the student and submitted to the Practicum Coordinator upon completion of the practicum.

Student ______________________________

Area of Concentration ______________________________

Practicum Site ______________________________

Preceptor ______________________________

Practicum Advisor ______________________________

Semester & Year of Practicum ______________________________

A- Practicum Logistics

1. The practicum coordinator provided adequate guidance to select a placement that was appropriate for my career objectives

2. The preceptor assisted me in formulating practicum objectives of mutual benefit to the organization and myself

3. The practicum advisor assisted me in establishing practicum objectives aligned with department specific competencies

Please answer with Always, Sometimes or Never

4. I was able to use my time efficiently

5. The practicum period was sufficient to complete my project
6. Adequate resources were available on-site to complete my project

7. My preceptor, practicum advisor & practicum coordinator were collectively able to solve problems that I faced

8. The guidance I received from my academic advisor was adequate

9. The guidance I received from my preceptor was adequate

B- LEARNING EXPERIENCE

10. I was able to apply knowledge & skills gained in course work

11. I was able to use interpersonal communication skills effectively

12. I was able to apply problem solving skills

13. The practicum experience enhanced my Understanding of public health as a profession

14. The practicum experience helped me develop my career objectives

15. I was encouraged to participate in the decision-making process

16. I was able to identify opportunities & obstacles influencing public health practice

17. I was able to identify ethical issues
18. The practicum experience enhanced my ability to adapt to new situations

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C- GENERAL

Please answer with Yes or No

Yes ☐ No ☐

19. I would recommend this site for future practicum

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20. What suggestions do you have for improving this Practicum experience?

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Signature: Date: