

**2010
IACCC SCHOLARSHIP**

SUMMARY OF CLINICAL PERFORMANCE

THE CLINICAL INSTRUCTOR COMPLETES THIS FORM. PLEASE TYPE.

Student Name _____

Facility Name _____

Length of Clinical Experience _____

Type of Clinical Experience (acute, outpatient, rehab, etc.) _____

RESPONSIBILITIES / DUTIES OF STUDENT May include, but are not limited to, the following: billing, patient scheduling, case management, reporting in rounds/conferences, ancillary staff training, community teaching/service, project development, research and development, marketing, additional administrative duties:

GIVE SPECIFIC PATIENT EXAMPLES (WITHOUT PATIENT IDENTIFICATION) THAT DEMONSTRATE THE STUDENT'S ABILITY IN EACH OF THE FOLLOWING CATEGORIES.

Interpersonal Communication

Problem Solving

Clinical Skills

Professional Behaviors (initiative, judgment, leadership, etc.)

What Areas Need Continued Improvement?

PLEASE SUMMARIZE SPECIFICALLY IN THE SPACE BELOW WHY YOU ARE RECOMMENDING THIS STUDENT FOR THE IACCC SCHOLARSHIP.

Clinical Instructor (please print) _____

Signature _____

Date _____