



P/T CLINICAL AND/OR LAB INSTRUCTOR EVALUATION

Instructor		Semester/Year
Course	Facility/Unit	
Instructor was informed in advance of the timing of this observation: <input type="checkbox"/> Yes <input type="checkbox"/> No		
Evaluator: please select one evaluation rating system: <input type="checkbox"/> M = Met; U = Unmet; N/O = Not Observed or <input type="checkbox"/> 4 = Strongly Agree; 3 = Agree; 2 = Disagree; 1 = Strongly Disagree; N/A = Does not Apply		
Criteria	Evaluation	
<i>Explains expectations and evaluation process clearly.</i>	<input type="checkbox"/> M or 4 <input type="checkbox"/> U or 3 <input type="checkbox"/> N/O or 2 <input type="checkbox"/> 1 <input type="checkbox"/> N/A	
Comments:		
<i>Verbalizes and/or demonstrates best practice, methods, procedures and rationales for each individual skill.</i>	<input type="checkbox"/> M or 4 <input type="checkbox"/> U or 3 <input type="checkbox"/> N/O or 2 <input type="checkbox"/> 1 <input type="checkbox"/> N/A	
Comments:		
<i>Ensures that clinical experiences are appropriate for course level of student.</i>	<input type="checkbox"/> M or 4 <input type="checkbox"/> U or 3 <input type="checkbox"/> N/O or 2 <input type="checkbox"/> 1 <input type="checkbox"/> N/A	
Comments:		
<i>Follows TMCC clinical course objectives, expectations, and program policies and procedures.</i>	<input type="checkbox"/> M or 4 <input type="checkbox"/> U or 3 <input type="checkbox"/> N/O or 2 <input type="checkbox"/> 1 <input type="checkbox"/> N/A	
Comments:		
<i>Enforces student dress code.</i>	<input type="checkbox"/> M or 4 <input type="checkbox"/> U or 3 <input type="checkbox"/> N/O or 2 <input type="checkbox"/> 1 <input type="checkbox"/> N/A	
Comments:		
<i>Faculty modeled professional behavior that demonstrated and facilitated learning.</i>	<input type="checkbox"/> M or 4 <input type="checkbox"/> U or 3 <input type="checkbox"/> N/O or 2 <input type="checkbox"/> 1 <input type="checkbox"/> N/A	
Comments:		
<i>Accessible and available to students and encourages instructor/student interaction.</i>	<input type="checkbox"/> M or 4 <input type="checkbox"/> U or 3 <input type="checkbox"/> N/O or 2 <input type="checkbox"/> 1 <input type="checkbox"/> N/A	
Comments:		

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<i>Technique demonstration was provided if needed or requested.</i>	<input type="checkbox"/> M or 4 <input type="checkbox"/> U or 3 <input type="checkbox"/> N/O or 2 <input type="checkbox"/> 1 <input type="checkbox"/> N/A
Comments:	
<i>Promotes an atmosphere conducive for learning.</i>	<input type="checkbox"/> M or 4 <input type="checkbox"/> U or 3 <input type="checkbox"/> N/O or 2 <input type="checkbox"/> 1 <input type="checkbox"/> N/A
Comments:	
<i>Critical thinking and problem solving were encouraged and facilitated.</i>	<input type="checkbox"/> M or 4 <input type="checkbox"/> U or 3 <input type="checkbox"/> N/O or 2 <input type="checkbox"/> 1 <input type="checkbox"/> N/A
Comments:	
<i>Provides explanations to students in a clear manner.</i>	<input type="checkbox"/> M or 4 <input type="checkbox"/> U or 3 <input type="checkbox"/> N/O or 2 <input type="checkbox"/> 1 <input type="checkbox"/> N/A
Comments:	
<i>Assists students to utilize concept maps for meeting client needs (when applicable).</i>	<input type="checkbox"/> M or 4 <input type="checkbox"/> U or 3 <input type="checkbox"/> N/O or 2 <input type="checkbox"/> 1 <input type="checkbox"/> N/A
Comments:	
<i>Demonstrates concern for student progress and was actively helpful.</i>	<input type="checkbox"/> M or 4 <input type="checkbox"/> U or 3 <input type="checkbox"/> N/O or 2 <input type="checkbox"/> 1 <input type="checkbox"/> N/A
Comments:	
<i>Encouraged student to self-analyze clinical work.</i>	<input type="checkbox"/> M or 4 <input type="checkbox"/> U or 3 <input type="checkbox"/> N/O or 2 <input type="checkbox"/> 1 <input type="checkbox"/> N/A
Comments:	
<i>Provides progressive constructive feedback to students concerning performance.</i>	<input type="checkbox"/> M or 4 <input type="checkbox"/> U or 3 <input type="checkbox"/> N/O or 2 <input type="checkbox"/> 1 <input type="checkbox"/> N/A
Comments:	
<i>Faculty communicated in a manner that provided support and encouragement.</i>	<input type="checkbox"/> M or 4 <input type="checkbox"/> U or 3 <input type="checkbox"/> N/O or 2 <input type="checkbox"/> 1 <input type="checkbox"/> N/A
Comments:	
<i>Demonstrates competency and organizational skills.</i>	<input type="checkbox"/> M or 4 <input type="checkbox"/> U or 3 <input type="checkbox"/> N/O or 2 <input type="checkbox"/> 1 <input type="checkbox"/> N/A
Comments:	
<i>Maintain accurate required records (i.e., attendance, clinical assignments, anecdotal notes as needed).</i>	<input type="checkbox"/> M or 4 <input type="checkbox"/> U or 3 <input type="checkbox"/> N/O or 2 <input type="checkbox"/> 1 <input type="checkbox"/> N/A
Comments:	

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<i>Inform lead teacher, in a timely manner, of any concerns regarding student's performance.</i>	<input type="checkbox"/> M or 4 <input type="checkbox"/> U or 3 <input type="checkbox"/> N/O or 2 <input type="checkbox"/> 1 <input type="checkbox"/> N/A
Comments:	
<i>Inform lead teacher, in a timely manner, of any concerns with the clinical site facility.</i>	<input type="checkbox"/> M or 4 <input type="checkbox"/> U or 3 <input type="checkbox"/> N/O or 2 <input type="checkbox"/> 1 <input type="checkbox"/> N/A
Comments:	
<i>Helps students relate theory to practice.</i>	<input type="checkbox"/> M or 4 <input type="checkbox"/> U or 3 <input type="checkbox"/> N/O or 2 <input type="checkbox"/> 1 <input type="checkbox"/> N/A
Comments:	
<i>Provides due process to students when problems arise.</i>	<input type="checkbox"/> M or 4 <input type="checkbox"/> U or 3 <input type="checkbox"/> N/O or 2 <input type="checkbox"/> 1 <input type="checkbox"/> N/A
Comments:	
Additional Comments	
Recommendations	
Signatures	
Evaluator	Date
Instructor	Date
Comments from Instructor	