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**MPH Health Promotion**

**Final Assessment of Student Practicum by Field Supervisor**

Name of student: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Practicum setting: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of supervisor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

For more information please contact the Practicum Placement Officer, at 416-978-8844 practicum.dlsph@utoronto.ca

1. What were the student’s major products/accomplishments during her/his practicum?

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1. What is your assessment of the quality of these products/accomplishments?

Poor [ ]  Average [ ]  Good [ ]  Very good [ ]  Outstanding [ ]

1. From your perspective, what competencies/skills (both practical and conceptual) did the student acquire as a result of this placement?

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1. To what extent did the student contribute to the ongoing work of your agency (or to your ongoing research)?

 [ ]  [ ]  [ ]  [ ]  [ ]  [ ]

 N/A

 not at all some very much not

 applicable

Comments:

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|  |

1. How well did the student relate to other members of your agency and/or those with whom s/he was in regular contact?

 [ ]  [ ]  [ ]  [ ]  [ ]  [ ]

 N/A

 not at all some very much not

 applicable

Comments:

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1. Overall, how would you rate the student’s performance during her/his practicum?

Poor [ ]  Average [ ]  Good [ ]  Very good [ ]  Outstanding [ ]

Comments:

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1. How might the student have been better prepared for her/his practicum prior to arrival at the practicum setting

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1. What other suggestions do you have for improving students’ practicum experiences in the future?

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**Recommended Grade: Pass \_\_\_\_\_\_ Fail \_\_\_\_\_\_ Grade deferred\_\_\_\_\_\_\_**

The following three grade choices are available to the preceptor:

**Pass**: The student has satisfactorily performed in the practicum setting, and has demonstrated appropriate knowledge and skill in the community health field.

**Fail**: The student has not performed in a satisfactory way and is not considered sufficiently well-prepared for his/her level of training to date. Further formal education and/or practicum experience is recommended.

**Grade Deferred**: The student has strong potential and it is recommended that further supervised practicum experience be gained prior to the completion of the practicum requirement.

Practicum Supervisor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Please discuss this evaluation with the student.**

Student: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Many thanks for completing this evaluation and for providing our students with an opportunity to enhance their knowledge and skills related to the practice of health promotion.

**Students, please upload completed form to Blackboard. For any questions or concerns contact the Practicum Placement Officer:** **practicum.dlsph@utoronto.ca**