

PRACTICUM PLACEMENT FEEDBACK FORM SPEECH-LANGUAGE PATHOLOGY

Student's Name: _____

Dates of Practicum Period: _____

Clinical Educator(s): _____

Practicum Site: _____

Population(s)	Setting(s)	Service(s)	Clinical Area(s)
<input type="checkbox"/> Adult <input type="checkbox"/> Preschool <input type="checkbox"/> School Age	<input type="checkbox"/> Hospital <input type="checkbox"/> Clinic <input type="checkbox"/> School <input type="checkbox"/> Long-Term Care Facility <input type="checkbox"/> Private Practice <input type="checkbox"/> Childcare Centre <input type="checkbox"/> Community Centre <input type="checkbox"/> Client Home	<input type="checkbox"/> Acute Care <input type="checkbox"/> Rehabilitation <input type="checkbox"/> In-patients <input type="checkbox"/> Out-patients <input type="checkbox"/> Individual therapy <input type="checkbox"/> Group therapy <input type="checkbox"/> Consultation <input type="checkbox"/> Parent/caregiver coaching <input type="checkbox"/> Parent program/ workshop <input type="checkbox"/> Other: _____	<input type="checkbox"/> Developmental Language <input type="checkbox"/> Acquired Language <input type="checkbox"/> Articulation/Phonology <input type="checkbox"/> Literacy/Pre-Literacy <input type="checkbox"/> Social Communication <input type="checkbox"/> Fluency <input type="checkbox"/> Voice <input type="checkbox"/> Resonance <input type="checkbox"/> AAC <input type="checkbox"/> Motor Speech <input type="checkbox"/> Dysphagia/Feeding <input type="checkbox"/> Other: _____

CLINICAL SETTING

1. Was the physical setting conducive to learning (e.g., appropriate space in which to work, etc.)?

2. Did you have ample access to materials, references, etc.?

3. Did you feel that the size of the caseload was appropriate for your level of experience?

4. In addition to conducting assessment and treatment sessions, did you have the opportunity to observe or participate in interprofessional activities?

5. What suggestions would you make for preparing students for this placement in the future?

SUPERVISION

1. Was there sufficient orientation to the clinical setting, assessment/treatment materials, caseload, etc?

2. Were the clinical educator's expectations made clear to you?

3. Were these expectations in accordance with your expectations? If not, in what way did they differ?

4. How much supervision was there? Did you feel this was sufficient?

5. Was there adequate time for conferencing? How much was there?

6. What sort of feedback did you receive (e.g., written, oral, both)? Did you feel this was sufficient?

7. Please comment on your clinical educator's strengths as clinical educator.

8. Would you recommend this placement to other students? Why or why not?

9. Additional comments:

S-LP Student Signature: _____

Date: _____