MWU College of Pharmacy Downers Grove APPE Formal Written Assignment/Documentation (see list below) Evaluation Form 2023-24

Student Name:		Date:					
Preceptor Name:		Site Name:					
**ONLY WHOLE NUMBERS M	T SCALE TO ANSWER THE FOLLOW AY BE USED; NO FRACTIONS OR D I in any item numbered 1 – 3 will r	ECIMALS					
4	4 3 2		1				
Very Good	Good	Needs Improvement	Significant Deficit				
Student has performed very well and functions in an independent manner (> 80% of time).	Student has performed above minimum requirements and functions in an independent manner (> 70% of time).	Student has met some minimum requirements and functions in an independent manner (> 50% of time).	Student has not met minimum requirements and cannot function independently.				
1. The student appropriately researched background materials/information necessary for the clinical project/activity.					3	2	1
2. The student demonstrated the ability to follow-through with the clinical project/activity from conception to conclusion and used effective time management in completing the clinical project/activity.			ion to	4	3	2	1
3. The clinical project/activity and supporting materials were of a professional quality. All educational materials were properly referenced.				4	3	2	1
**Transfer the student's over Dimension when completing	ections (maximum points = 12) Tall score to the Final Evaluation Foundation for the final evaluation online via RM	•					aper
Comments:							
Preceptor signature:		Date:					
An assignment from the list be	elow may be completed.						

✓ Soap Note

- ✓ Patient Care Documentation
- ✓ Patient Care Plan
- ✓ DI paper
- ✓ Drug monograph

This is by no means an exclusive list. Preceptors can assign other projects/activities. Format, including handouts, will be determined by type/scope of project and as required by preceptor.