**Generic Abilities ~ Assessment Form**

**Clinical Instructor- To complete this form, save to your computer first or print form and fill out by hand.**

**Instructions:** Assess each ability based on your assessment of the student (highlighted areas – Page 2 & 3) and click the check box to reflect your final rating. Comments and examples are required to justify the level marked. Please sign and date the assessment.

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| **B – Beginning Level** | **E – Entry Level** |

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| 1. Commitment to Learning |  **B** [ ]  [ ]  [ ]  [ ]  [ ]  **E** |
|  Comments & Examples:       |
|  |
| 2. Interpersonal Skills: |  **B** [ ]  [ ]  [ ]  [ ]  [ ]  **E** |
|  Comments & Examples:        |
|  |
| 3. Communication Skills: |  **B** [ ]  [ ]  [ ]  [ ]  [ ]  **E** |
|  Comments & Examples:        |
|  |
| 4. Effective Use of Time and Resources: |  **B** [ ]  [ ]  [ ]  [ ]  [ ]  **E** |
|  Comments & Examples:        |
|  |
| 5. Use of Constructive Feedback: |  **B** [ ]  [ ]  [ ]  [ ]  [ ]  **E** |
|  Comments & Examples:        |
|  |
| 6. Problem-Solving: |  **B** [ ]  [ ]  [ ]  [ ]  [ ]  **E** |
|  Comments & Examples:        |
|  |
| 7. Professionalism: |  **B** [ ]  [ ]  [ ]  [ ]  [ ]  **E** |
|  Comments & Examples:        |
|  |
| 8. Responsibility: |  **B** [ ]  [ ]  [ ]  [ ]  [ ]  **E** |
|  Comments & Examples:        |
|  |
| 9. Critical Thinking: |  **B** [ ]  [ ]  [ ]  [ ]  [ ]  **E** |
|  Comments & Examples:        |
|  |
| 10. Stress Management : |  **B** [ ]  [ ]  [ ]  [ ]  [ ]  **E** |
|  Comments & Examples:        |

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| Student : |       | Date : |       |
| Clinical Instructor : |       |