

Nursing Student Evaluation Form

_____ School of Nursing

(To be returned to Beverly Clark on the last day of your clinical rotation.
Thank you for giving your time and attention to providing this important feedback!)

On a scale of 1-5 (5 being the highest), please rank the following items:

1. Orientation information delivered in a pleasant and informative manner	1 2 3 4 5
2. Expectations of staff and students explained clearly	1 2 3 4 5
3. Helpfulness of Staff	1 2 3 4 5
4. Overall friendliness and courtesy of staff	1 2 3 4 5

Please list the NAMES of staff who have been especially helpful to you.

Please list the NAMES of staff who have been NOT helpful to you.

Please add anything else you'd like for us to know about your clinical experience here with us.

Thank you for working with our staff and patients. We wish you all the best in your nursing careers.

Sincerely,
Beverly Clark, RN
Clinical Educator
Parthenon Pavilion Psychiatric Hospital