Appendix G: Student Evaluation of Preceptor

(To be completed at the end of each semester)

Student Name: _____

Date: _____

Agency: _____Preceptor Name: _____

1. How did the preceptor share expertise with you?

2. How did the preceptor create a climate that facilitated or did not facilitate your learning (sharing information, giving feedback, offering suggestions, etc.)

3. Did you enjoy this rotation? What would you recommend to be changed or done differently?

4. What other resources, besides the preceptor, were beneficial to this experience?

5. Would you recommend this rotation to other students? Why?

6. Would you recommend this preceptor for other students? Why?