

Clinical Educator Placement Feedback

Name of Facility/Service:

Educator's Name:

Phone Number

Please provide a brief outline of JCU STUDENTS'S strengths (e.g. areas of knowledge/ professionalism, placement preparation):

Please provide a brief outline of JCU's strengths in terms of clinical educator support:

Please provide a brief outline of perceived deficits in supports from JCU:

How can JCU assist to make improvements in placements:

Urgent Not Urgent (please select one)

Best time of day to phone?
(If applicable)

Educator's Name:

Date: