UAB CLINICAL ROTATION
GOAL SETTING WORKSHEET

Use this sheet to document and discuss goals for the student’s rotation. This should be a joint effort of student and supervisor. If this is not the first rotation for the student, use this sheet to document or review goals that were set at the end of the previous rotation.

Student Name: _________________________________________
Supervisor Name: _______________________________________
Rotation Site: ___________________________________________
Dates of Rotation: _______________________________________
Type of Rotation: Prenatal  Pediatric  Cancer   Other: ________
Rotation Number: First   Second Third Fourth Fifth   Other: ________

Goals:
1) _________________________________________________________________________
   _________________________________________________________________________
   _________________________________________________________________________

2) _________________________________________________________________________
   _________________________________________________________________________
   _________________________________________________________________________

3) _________________________________________________________________________
   _________________________________________________________________________
   _________________________________________________________________________

For Example Goals, see attached sheet

Logbook Case Benchmark: 12
24
Other: _____________________________________________

Student Signature: ___________________________ Date: ________________

Supervisor Signature: _________________________ Date: ________________