This evaluation is to be completed by the student at the end of the rotation. This feedback is intended to be given immediately to the site and supervisor. The student is responsible for organizing a face-to-face meeting between the student and supervisor at the end of the rotation to review this form (in addition to the student's evaluation completed by the supervisor). Please also complete the anonymous survey in eValue, which will not be sent to the site until after graduation. Please rate your satisfaction with the following:						
OVERALL ORGANIZATION	N OF T	HE SETTIN	IG			
(Question 1 of 12 - Manda						
	Poor	Adequate	Good	Excellent	NA	
Pre-rotation preparation	0	0	0	0	0	
Orientation	0	0	0	0	0	
Clarity of expectations	0	0	0	0	0	
Discussion of evaluations	0	0	0	0	0	
Student space allotment	0	0	0	0	0	
Access to resources	0	0	0	0	0	
Treated respectfully and fairly	0	0	0	0	0	
Foster an inclusive environment	0	0	0	0	0	
(Question 2 of 12 - Manda	ntory)					
Comments about organization	n:					

Please rate your satisfaction with the following:									
(Question 3 of 12 - Mandatory) OPPORTUNITIES IN THE CLINICA	Poor	Adequate	Good	Excellent	NA				
To observe counseling sessions	0	0	0	0	0				
To co-counsel sessions		0	0	0	0	0			
To independently counsel sessions	0	0	0	0	0				
To see a variety of cases	0	0	0	0	0				
To participate in case conference	0	0	0	0	0				
To interact with multiple genetics professional		0	0	0	0	0			
To identify and incorporate multiple forms of p disability, etc.)	gender,	0	0	0	0	0			
To identify systemic bias and/or social determ	To identify systemic bias and/or social determinants of health						0	0	0
Comments about ability to achieve case benchmarks SUPERVISOR'S FEEDBACK TO THE STUDENT (Question 5 of 12 - Mandatory) Very useful Not helpful Unconstructive or harmful; I did not feel supported The quality of feedback from the supervisor was									
(Question 6 of 12) Comments about supervisor's feedback to the student (Question 7 of 12 - Mandatory)									
	Appropriate and timely		Adequate	Inconsisten	t	Inadequate; I needed more for a regular basis		more feedb basis	ack
The timing of the feedback from the supervisor was	0		0	0		0			

(Question 8 of 12)								
Comments about timing of feedback from the supervisor								
(Question 9 of 12 - Mandatory)								
	Very helpful; I was able to see improvement	I could have use more structure to plan improvemen	D disc	An evaluation of my performances was not discussed until the end of my rotation		lluation of my nance was not ussed at all		
Overall evaluations of my performance as a genetic counseling professional were	0	0		0		0		
(Question 10 of 12)								
Comments about overall evaluations of my performance								
OTHER								
(Question 11 of 12 - Mandatory)								
What genetic counseling skills do you feel you learned or improved upon during this rotation?								
Other Case Supervisors - Please comment on the usefulness of seeing patients with counselors (and MDs) other than your primary rotation supervisor:								
Please comment on the process of goal-setting with your supervisor:								
How could this rotation be improved to further encourage professional development of the student?								
ADDITIONAL COMMENTS								

STRENGTHS/ WEAKNESSES						
(Question 12 of 12 - Mandatory)						
What are three (3) strengths of this training site?						
What are three (3) weaknesses of this training site or three suggestions for improving the rotation for a future student?						
Review your answers in this evaluation. If you are satisfied with the evaluation, click the SUBMIT button below. Once submitted, evaluations are no longer available for you to make further changes.						
Save For Later Submit						