

# SCHOOL OF NURSING

## WILLIAM PATERSON UNIVERSITY

### Doctor of Nursing Practice Program

#### COURSE END EVALUATION OF CLINICAL SITE

Practicum Site: \_\_\_\_\_

Preceptor's Name: \_\_\_\_\_

Course #: \_\_\_\_\_ Semester: \_\_\_\_\_ Year: \_\_\_\_\_

Please complete by checking (√) all that apply in each category.

Type of site: rural clinic private practice public health other \_\_\_\_\_

Experiences Available: acute chronic in-hospital clinic

This evaluation is based on the course presented to students. **The practicum experience, itself is to be evaluated, not the faculty teaching the course.**

**Directions:** Choose an appropriate response for each question. Rate your **practicum experience** on each item using the following rating scale:

**RATING SCALE:** 0 = Not Applicable 3 = Agree  
5 = Strongly Agree 2 = Moderately Disagree  
4 = Moderately Agree 1 = Strongly Disagree

	0	5	4	3	2	1
1. Institution/Agency offers learning experiences needed to fulfill the objectives of the course.						
2. Agency provided an orientation to the policies and procedures.						
3. I would recommend this agency for future practicum student's placements.						

Comments: