Basic Nursing Assistant Training Program

Mid-Term Clinical Evaluation

Student Name:	
Clinical Instructor:	
Clinical Site:	
Evaluation Date:	
Student Self-Evaluat	<u>ion</u>
1. List characteristics	and skills that you feel confident performing in clincal:
2. List characteristics	and skills that you need more practice at in the clinical:
3. List dates you hav	e missed clinical and explain why you were absent:

Student Performance Evaluation by Instructor

1. The characteristics and skills that you possess that stand out in	clinical are:
2. The characteristics and skills you need improve to be successful.	l in clinical are:
3. Remediation plan, if applicable:	
Instructor Signature:	_Date:
Student Signature:	Date: