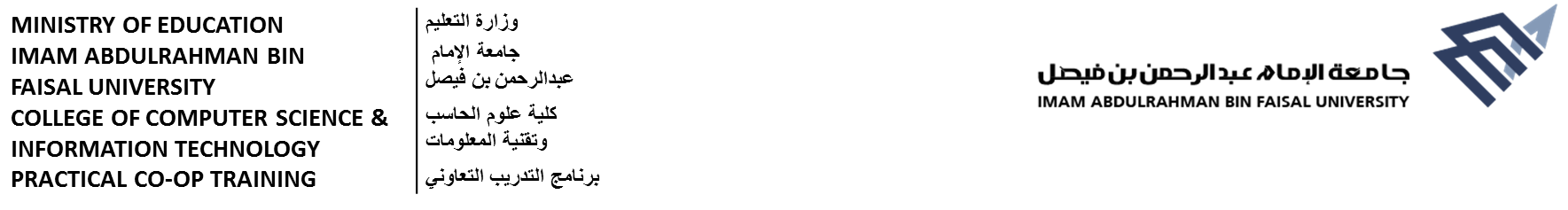
**Student Satisfaction Form (**PCT-111**)**



(to be filled by Student at <https://ud.questionpro.com/t/ALwV8ZszbC>)

**Section 1: General Information related to trainee (COOP student):**

|  |  |  |
| --- | --- | --- |
| **Gender** | Male  | Female  |
| **College** |  | |
| **Department** |  | |
| **Level** |  | |
| **Type of Field Training** |  Clinical training                    Internship   Summer training                  COOP training | |
| **How was this training opportunity provided** |  by college   by myself | |

**Section 2: The following table displays field training domains with related questions. Please use the provided Likert Scale to choose the best response that fits (1: Strongly disagree-------5: Strongly agree)**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Domain** | **Related Question** | **1** | **2** | **3** | **4** | **5** |
| **Training Application** | The application process was clear |  |  |  |  |  |
| The application process was efficient |  |  |  |  |  |
| **Orientation** | An orientation was conducted by the College before training. | **Yes                          No**  **Note: If you answered “yes” please respond to follow up questions relating to Orientation** | | | | |
| The orientation was helpful |  |  |  |  |  |
| The training plan was clear |  |  |  |  |  |
| The training was related to the specialty |  |  |  |  |  |
| **Training Program** | A training manual was provided before training | **Yes                          No**  **Note: If you answered “yes” please respond to follow up questions relating to the training manuals** | | | | |
| The training manual was clear |  |  |  |  |  |
| The training manualincluded relevant information needed |  |  |  |  |  |
| **Training Supervision** | The College assigned an Academic Supervisor for follow ups during training | **Yes                          No**  **Note: If you answered “yes” please respond to follow up questions relating to Training Supervision** | | | | |
| The Academic Supervisor performed routine follow ups with the trainee | ** Daily    Weekly    Biweekly**  ** Monthly    Never** | | | | |
| The Academic Supervisor dealt with issues faced by the trainee effectively |  |  |  |  |  |
| **Assessment** | Assessment plan was provided | **Yes ð                         Noð**  **Note: If you answered “yes” please respond to follow up questions relating to Assessment** | | | | |
| Assessment was clear |  |  |  |  |  |
| Assessment was fair |  |  |  |  |  |

**Section 3: Brief written comments**

|  |
| --- |
| 1. **What was the best experience(s) of your field training?** |
| 1. **What suggestions would you give IAU to improve the training program?** |

**\*Student should fill this form online at:** <https://ud.questionpro.com/t/ALwV8ZszbC> **at the end of the COOP training.**