



Physical Therapist Assistant Program Clinical Observation Form

Dear Clinician,

As part of the requirements for application to the Onondaga Community College Physical Therapist Assistant Program, potential students are required to spend a minimum of 20 hours of observation in a PT practice, with either a PT or a PTA. Potential students are instructed to call the PT clinic to request permission to observe, and request a specific time that is acceptable for their observation. The PT or PTA who oversees the potential student should complete this form provided, and seal it in an envelope, with your signature across the seal; then return the envelope to the potential student, who will submit it to the college with the rest of their application. Thank you for your time and valuable assistance to the potential student, helping them to gain knowledge about the practice of physical therapy!

Student Name: _____

Name of Facility: _____

Address: _____

City _____ ST _____ ZIP _____

Phone: _____

Type of Facility: _____

To be completed by the supervising therapist.

Total number of hours performed by the student: _____

- Did this student handle setting up this observation appropriately? YES NO
- Was the student prompt and dependable during their time with you? YES NO
- Did the student demonstrate the ability to establish communication with you? YES NO
- Did the student appear interested and ask appropriate questions? YES NO
- Was the student courteous & professional during interaction with patients and staff? YES NO
- Was the student's appearance appropriate for the practice setting? YES NO
- Was the student able to follow verbal and/or written instructions? YES NO

Comments:

PT/PTA Signature: _____

License #: _____

PT/PTA Name (Printed): _____

Date: _____