CSUN BS, Radiologic Technology Affective Assessment

This form is to evaluate ____________________________________ while in the__________________________ rotation
at ________________ site from ____/____/____ to ____/____/____. It is intended to assess only affective personality traits.
(i.e., attitudes, emotions, feelings, etc.)

Please indicate your assessment by filling in the appropriate number in the space provided next to each statement.

0 = Unsatisfactory  1 = Needs Improvement  2 = Satisfactory  3 = Above Average  N/A = Unable to Assess

1. Observes personal cleanliness and is appropriately dressed.
2. Work and cooperate with all department personnel, clinical instructors, and other students.
3. Be dependable with all assigned duties.
4. Being in the area at the assigned times (punctuality).
5. Organize thoughts and functions effectively under normal and emergency conditions.
6. Demonstrate initiative by seeking extra work and responsibilities.
7. Accept constructive criticism in a positive manner.
8. Correct faults or weaknesses indicated by others.
9. Exhibit confidence in technical abilities.
10. Avoid becoming over confident in technical abilities.
11. Appear interested and enthusiastic about radiography.
12. Keep equipment and supplies neat, clean, and well stocked.
13. Observe all hospital rules and regulations.
14. Observe the profession’s ethical guidelines for patient care and education.
15. Avoid displays of inappropriate behavior.
17. Be courteous and respectful to patients and hospital personnel.
18. Treat all patients equally regardless of age, sex, race, religion, disability, or disease.
19. Exhibit a humanistic response to patient needs.
20. Promote open communication with patients for “patient education”.

1. Identify this student’s strengths – please check all that apply:
   - patient education
   - technical confidence
   - patient relations
   - ability to follow instructions
   - follow through
   - initiative
   - self confidence
   - problem solving
   - communication with staff
   - ability to follow instructions

2. Identify this student’s weaknesses or “attributes to improve” – please check all that apply:
   - patient education
   - technical confidence
   - patient relations
   - ability to follow instructions
   - follow through
   - initiative
   - self confidence
   - problem solving
   - communication with staff

3. Indicate your overall impression of this student: (circle)

   0 = Unsatisfactory  1 = Needs Improvement  2 = Satisfactory  3 = Above Average

Clinical Instructor’s Comments:_____________________________________________________________________________________

Clinical Instructor’s Signature:________________________________________________________ Date:______________________

Student’s Comments:_____________________________________________________________________________________

Student’s Signature:________________________________________________________ Date:______________________

Clinical Coordinator’s Comments:___________________________________________________________________________

Clinical Coordinator’s Signature:________________________________________________________ Date:______________________