

**Sage Graduate School
Program in Occupational Therapy
45 Ferry Street, Troy, NY 12180 (518) 244-2267**

**Clinical Observation Hours
(return this form to the Sage Occupational Therapy Department)**

The Sage Colleges Program in Occupational Therapy requires that each of our Occupational Therapy students observe or assist as a clinical volunteer under the direction of an Occupational Therapist for a minimum of **20 hours**. We believe that this time helps provide prospective students with a realistic perspective of the clinical aspects of therapy that are essential to their academic success. Please have the licensed Occupational Therapist complete this form and rating scale, and return it to the Sage Occupational Therapy Department by **February 1**. Multiple copies of this form can be made if observation hours will be completed at more than one site. Thank you.

Name of Student: _____

Name of Clinical Facility: _____

Address: _____

Total Hours Spent at your Facility: _____

In what capacity? Observation: _____
 Assistance: _____
 Other (explain): _____

Please rate the student in each of the following areas by circling the corresponding rating for each category:

	1/ Below Average;	2/ Average;	3/ Above Average;	4/ Superior		1	2	3	4
Relates to Patients	1	2	3	4	Reliable/Dependable	1	2	3	4
Relates to Staff	1	2	3	4	Judgment	1	2	3	4
Accepts Direction	1	2	3	4	Initiative	1	2	3	4
Carries Out Instruction	1	2	3	4	Maturity	1	2	3	4
Verbal Communication	1	2	3	4	Appearance, Hygiene	1	2	3	4
Written Communication	1	2	3	4	Professional potential	1	2	3	4
Grasp theoretical concepts	1	2	3	4	Interest/Motivation	1	2	3	4

Additional Comments: Also please indicate on the back of this form reasons that you believe the applicant will be an asset to the Occupational Therapy profession.

Signature

Institution/Department

Therapist's Title

Date