

Course # _____

Semester & Year _____

Student _____

**Angelo State University
Department of Nursing
Faculty Evaluation of Clinical Facility/Preceptor Experience**

Preceptor _____ Date _____

Facility _____

Faculty Member _____

	Strongly Disagree 1	Disagree 2	Neutral 3	Agree 4	Strongly Agree 5
The Preceptor					
Provided a patient population relevant to student learning needs					
Provided nursing care relevant to clinical objectives					
Facilitated student accomplishment of clinical objectives					
Involved student as a member of the interdisciplinary team					
Maintains open lines of communication with faculty					
Completes student evaluation as requested					
Provided an overall quality learning experience appropriate to the student					
The Clinical Facility/Experience					
Provided opportunities to meet the educational and program objectives					
Provided physical space to accommodate student learning					
Provided employees who helped students meet course objectives					
Was a beneficial experience for the student					
Was a clinical experience worth recommending for future students					

Comments

Faculty Signature

Date