

Student Name: Miss Eman Malhas
Attachment: Paediatrics Core Hospital
Hospital: St Mary's Hospital
Date: 5 November 2012 to 21 December 2012

CID: 508516



Supervisor / Tutor's feedback:

May include comments on ability to interact with children of different ages, level of knowledge, professionalism (attendance, punctuality, appearance, respect for patients and their families) and working relationships with peers and health professionals.

Please comment on the student's strengths:

Please comment on suggested areas of improvement:

If unable to comment, please give reasons:

Please indicate the student's overall performance during the core rotation			
Above Expectations	<input type="checkbox"/>	Supervisor / Tutor's Name:	Student Signature
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>	Signature: _____ Date: _____	Date: _____
Below Expectations (You MUST give comments)	<input type="checkbox"/>		

Student Name: Miss Amy Ellena Katharine Mallorie
Attachment: Paediatrics Core Hospital
Hospital: St Mary's Hospital
Date: 5 November 2012 to 21 December 2012

CID: 510230



Supervisor / Tutor's feedback:

May include comments on ability to interact with children of different ages, level of knowledge, professionalism (attendance, punctuality, appearance, respect for patients and their families) and working relationships with peers and health professionals.

Please comment on the student's strengths:

Please comment on suggested areas of improvement:

If unable to comment, please give reasons:

Please indicate the student's overall performance during the core rotation

Above Expectations		Supervisor / Tutor's Name:	Student Signature
Meets Expectations			
Borderline		Signature: _____ Date: _____	
Below Expectations (You MUST give comments)			
			Date:

Student Name: Miss Ramya Manoharan
Attachment: Paediatrics Core Hospital
Hospital: St Mary's Hospital
Date: 5 November 2012 to 21 December 2012

CID: 548434



Supervisor / Tutor's feedback:

May include comments on ability to interact with children of different ages, level of knowledge, professionalism (attendance, punctuality, appearance, respect for patients and their families) and working relationships with peers and health professionals.

Please comment on the student's strengths:

Please comment on suggested areas of improvement:

If unable to comment, please give reasons:

Please indicate the student's overall performance during the core rotation			
Above Expectations	<input type="checkbox"/>	Supervisor / Tutor's Name:	Student Signature Date:
Meets Expectations	<input type="checkbox"/>	Signature: _____ Date: _____	
Borderline	<input type="checkbox"/>		
Below Expectations (You MUST give comments)	<input type="checkbox"/>		

Student Name: Miss Isabel Victoria McLuskie
Attachment: Paediatrics Core Hospital
Hospital: St Mary's Hospital
Date: 5 November 2012 to 21 December 2012

CID: 508968



Supervisor / Tutor's feedback:

May include comments on ability to interact with children of different ages, level of knowledge, professionalism (attendance, punctuality, appearance, respect for patients and their families) and working relationships with peers and health professionals.

Please comment on the student's strengths:

Please comment on suggested areas of improvement:

If unable to comment, please give reasons:

Please indicate the student's overall performance during the core rotation			
Above Expectations	<input type="checkbox"/>	Supervisor / Tutor's Name:	Student Signature
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>	Signature: _____ Date: _____	Date: _____
Below Expectations (You MUST give comments)	<input type="checkbox"/>		

Student Name: Mr Benjamin Luke Milne
Attachment: Paediatrics Core Hospital
Hospital: St Mary's Hospital
Date: 5 November 2012 to 21 December 2012

CID: 549169



Supervisor / Tutor's feedback:

May include comments on ability to interact with children of different ages, level of knowledge, professionalism (attendance, punctuality, appearance, respect for patients and their families) and working relationships with peers and health professionals.

Please comment on the student's strengths:

Please comment on suggested areas of improvement:

If unable to comment, please give reasons:

Please indicate the student's overall performance during the core rotation			
Above Expectations	<input type="checkbox"/>	Supervisor / Tutor's Name:	Student Signature
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>	Signature: _____ Date: _____	Date: _____
Below Expectations (You MUST give comments)	<input type="checkbox"/>		

Student Name: Miss Maleeha Munnawwar
Attachment: Paediatrics Core Hospital
Hospital: St Mary's Hospital
Date: 5 November 2012 to 21 December 2012

CID: 508964



Supervisor / Tutor's feedback:

May include comments on ability to interact with children of different ages, level of knowledge, professionalism (attendance, punctuality, appearance, respect for patients and their families) and working relationships with peers and health professionals.

Please comment on the student's strengths:

Please comment on suggested areas of improvement:

If unable to comment, please give reasons:

Please indicate the student's overall performance during the core rotation			
Above Expectations	<input type="checkbox"/>	Supervisor / Tutor's Name:	Student Signature
Meets Expectations	<input type="checkbox"/>	Signature: _____ Date: _____	Date: _____
Borderline	<input type="checkbox"/>		
Below Expectations (You MUST give comments)	<input type="checkbox"/>		

Student Name: Mr. Huy Quang Nguyen
Attachment: Paediatrics Core Hospital
Hospital: St Mary's Hospital
Date: 5 November 2012 to 21 December 2012

CID: 550027



Supervisor / Tutor's feedback:

May include comments on ability to interact with children of different ages, level of knowledge, professionalism (attendance, punctuality, appearance, respect for patients and their families) and working relationships with peers and health professionals.

Please comment on the student's strengths:

Please comment on suggested areas of improvement:

If unable to comment, please give reasons:

Please indicate the student's overall performance during the core rotation			
Above Expectations	<input type="checkbox"/>	Supervisor / Tutor's Name:	Student Signature
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>	Signature: _____ Date: _____	Date: _____
Below Expectations (You MUST give comments)	<input type="checkbox"/>		

Student Name: Miss Kalliste Anna Ronghui Oh
Attachment: Paediatrics Core Hospital
Hospital: St Mary's Hospital
Date: 5 November 2012 to 21 December 2012

CID: 644349



Supervisor / Tutor's feedback:

May include comments on ability to interact with children of different ages, level of knowledge, professionalism (attendance, punctuality, appearance, respect for patients and their families) and working relationships with peers and health professionals.

Please comment on the student's strengths:

Please comment on suggested areas of improvement:

If unable to comment, please give reasons:

Please indicate the student's overall performance during the core rotation

Above Expectations	<input type="checkbox"/>	Supervisor / Tutor's Name:	Student Signature
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>	Signature: _____ Date: _____	
Below Expectations (You MUST give comments)	<input type="checkbox"/>		

Student Name: Miss Jemma Oyenuga
Attachment: Paediatrics Core Hospital
Hospital: St Mary's Hospital
Date: 5 November 2012 to 21 December 2012

CID: 549970



Supervisor / Tutor's feedback:

May include comments on ability to interact with children of different ages, level of knowledge, professionalism (attendance, punctuality, appearance, respect for patients and their families) and working relationships with peers and health professionals.

Please comment on the student's strengths:

Please comment on suggested areas of improvement:

If unable to comment, please give reasons:

Please indicate the student's overall performance during the core rotation			
Above Expectations	<input type="checkbox"/>	Supervisor / Tutor's Name:	Student Signature
Meets Expectations	<input type="checkbox"/>	Signature: _____ Date: _____	
Borderline	<input type="checkbox"/>		
Below Expectations (You MUST give comments)	<input type="checkbox"/>		

Student Name: Miss Jennifer Priti Patel
Attachment: Paediatrics Core Hospital
Hospital: St Mary's Hospital
Date: 5 November 2012 to 21 December 2012

CID: 549388



Supervisor / Tutor's feedback:

May include comments on ability to interact with children of different ages, level of knowledge, professionalism (attendance, punctuality, appearance, respect for patients and their families) and working relationships with peers and health professionals.

Please comment on the student's strengths:

Please comment on suggested areas of improvement:

If unable to comment, please give reasons:

Please indicate the student's overall performance during the core rotation			
Above Expectations	<input type="checkbox"/>	Supervisor / Tutor's Name:	Student Signature
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>	Signature: _____ Date: _____	Date: _____
Below Expectations (You MUST give comments)	<input type="checkbox"/>		

Student Name: Miss Radheka Puja Tushar Patel
Attachment: Paediatrics Core Hospital
Hospital: North West London Hospitals
Date: 5 November 2012 to 21 December 2012

CID: 513680



Supervisor / Tutor's feedback:

May include comments on ability to interact with children of different ages, level of knowledge, professionalism (attendance, punctuality, appearance, respect for patients and their families) and working relationships with peers and health professionals.

Please comment on the student's strengths:

Please comment on suggested areas of improvement:

If unable to comment, please give reasons:

Please indicate the student's overall performance during the core rotation

Above Expectations		Supervisor / Tutor's Name:	Student Signature
Meets Expectations			
Borderline		Signature: _____ Date: _____	Date:
Below Expectations (You MUST give comments)			

Student Name: Miss Melissa Nicole Petronikolos
Attachment: Paediatrics Core Hospital
Hospital: North West London Hospitals
Date: 5 November 2012 to 21 December 2012

CID: 454735



Supervisor / Tutor's feedback:

May include comments on ability to interact with children of different ages, level of knowledge, professionalism (attendance, punctuality, appearance, respect for patients and their families) and working relationships with peers and health professionals.

Please comment on the student's strengths:

Please comment on suggested areas of improvement:

If unable to comment, please give reasons:

Please indicate the student's overall performance during the core rotation

Above Expectations		Supervisor / Tutor's Name:	Student Signature
Meets Expectations			
Borderline		Signature: _____ Date: _____	
Below Expectations (You MUST give comments)			

Student Name: Mr. Alexander Presland
Attachment: Paediatrics Core Hospital
Hospital: North West London Hospitals
Date: 5 November 2012 to 21 December 2012

CID: 643986



Supervisor / Tutor's feedback:

May include comments on ability to interact with children of different ages, level of knowledge, professionalism (attendance, punctuality, appearance, respect for patients and their families) and working relationships with peers and health professionals.

Please comment on the student's strengths:

Please comment on suggested areas of improvement:

If unable to comment, please give reasons:

Please indicate the student's overall performance during the core rotation			
Above Expectations	<input type="checkbox"/>	Supervisor / Tutor's Name:	Student Signature
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>	Signature: _____ Date: _____	Date: _____
Below Expectations (You MUST give comments)	<input type="checkbox"/>		

Student Name: Miss Iniya Rajendran
Attachment: Paediatrics Core Hospital
Hospital: Hillingdon Hospital
Date: 5 November 2012 to 21 December 2012

CID: 513479



Supervisor / Tutor's feedback:

May include comments on ability to interact with children of different ages, level of knowledge, professionalism (attendance, punctuality, appearance, respect for patients and their families) and working relationships with peers and health professionals.

Please comment on the student's strengths:

Please comment on suggested areas of improvement:

If unable to comment, please give reasons:

Please indicate the student's overall performance during the core rotation			
Above Expectations	<input type="checkbox"/>	Supervisor / Tutor's Name:	Student Signature
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>	Signature: _____ Date: _____	Date: _____
Below Expectations (You MUST give comments)	<input type="checkbox"/>		

Student Name: Miss Kate Margaret Richmond
Attachment: Paediatrics Core Hospital
Hospital: St Mary's Hospital
Date: 5 November 2012 to 21 December 2012

CID: 555427



Supervisor / Tutor's feedback:

May include comments on ability to interact with children of different ages, level of knowledge, professionalism (attendance, punctuality, appearance, respect for patients and their families) and working relationships with peers and health professionals.

Please comment on the student's strengths:

Please comment on suggested areas of improvement:

If unable to comment, please give reasons:

Please indicate the student's overall performance during the core rotation

Above Expectations	<input type="checkbox"/>	Supervisor / Tutor's Name:	Student Signature
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>	Signature: _____ Date: _____	
Below Expectations (You MUST give comments)	<input type="checkbox"/>		

Student Name: Mr Toby Alan Rowland
Attachment: Paediatrics Core Hospital
Hospital: West Middlesex Hospital
Date: 5 November 2012 to 21 December 2012

CID: 549490



Supervisor / Tutor's feedback:

May include comments on ability to interact with children of different ages, level of knowledge, professionalism (attendance, punctuality, appearance, respect for patients and their families) and working relationships with peers and health professionals.

Please comment on the student's strengths:

Please comment on suggested areas of improvement:

If unable to comment, please give reasons:

Please indicate the student's overall performance during the core rotation

Above Expectations		Supervisor / Tutor's Name:	Student Signature
Meets Expectations			
Borderline		Signature: _____ Date: _____	Date:
Below Expectations (You MUST give comments)			