

Student Name: Mr Gregory Manning
Attachment: Paediatrics Core Hospital
Hospital: St Mary's Hospital
Date: 30 July 2012 to 14 September 2012

CID: 555903



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: Mr Timothy James Marshall
Attachment: Paediatrics Core Hospital
Hospital: St Mary's Hospital
Date: 30 July 2012 to 14 September 2012

CID: 552501



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 Eve-Elizabeth McDermott
Attachment: Paediatrics Core Hospital
Hospital: St Mary's Hospital
Date: 30 July 2012 to 14 September 2012

CID: 551652



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: Mr Sami Michaels
Attachment: Paediatrics Core Hospital
Hospital: St Mary's Hospital
Date: 30 July 2012 to 14 September 2012

CID: 467124



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: Mr Kush Naker
Attachment: Paediatrics Core Hospital
Hospital: St Mary's Hospital
Date: 30 July 2012 to 14 September 2012

CID: 552250



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: Mr William Ocen
Attachment: Paediatrics Core Hospital
Hospital: St Mary's Hospital
Date: 30 July 2012 to 14 September 2012

CID: 509711



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 Chinenye Doris Oparah
Attachment: Paediatrics Core Hospital
Hospital: St Mary's Hospital
Date: 30 July 2012 to 14 September 2012

CID: 553945



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: Mr Amish Patel
Attachment: Paediatrics Core Hospital
Hospital: St Mary's Hospital
Date: 30 July 2012 to 14 September 2012

CID: 552282



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 Nisha Patel
Attachment: Paediatrics Core Hospital
Hospital: St Mary's Hospital
Date: 30 July 2012 to 14 September 2012

CID: 549627



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: Mr Steven Peebles
Attachment: Paediatrics Core Hospital
Hospital: North West London Hospitals
Date: 30 July 2012 to 14 September 2012

CID: 551742



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: Mr Karan Prakash
Attachment: Paediatrics Core Hospital
Hospital: St Mary's Hospital
Date: 30 July 2012 to 14 September 2012

CID: 513715



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 Chandni Radia
Attachment: Paediatrics Core Hospital
Hospital: North West London Hospitals
Date: 30 July 2012 to 14 September 2012

CID: 511903



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:

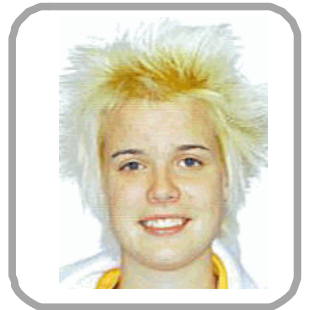
Please comment on suggested areas of improvement:

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 Suzanne Catherine Rayner
Attachment: Paediatrics Core Hospital
Hospital: St Mary's Hospital
Date: 30 July 2012 to 14 September 2012

CID: 511261



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 Frances Rose
Attachment: Paediatrics Core Hospital
Hospital: North West London Hospitals
Date: 30 July 2012 to 14 September 2012

CID: 549341



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			
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Meets Expectations	<input type="checkbox"/>	Signature: _____ Date: _____	
Borderline	<input type="checkbox"/>		
Below Expectations (You MUST give comments)	<input type="checkbox"/>		