

Student Name: Mr Imran Ahmed
Attachment: Paediatrics Core Hospital
Hospital: West Middlesex Hospital
Date: 17 September 2012 to 2 November 2012

CID: 549796



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:

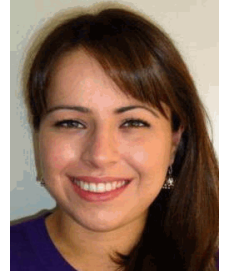
Please comment on suggested areas of improvement:

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: Dr. Hind Al-Qassab
Attachment: Paediatrics Core Hospital
Hospital: West Middlesex Hospital
Date: 17 September 2012 to 2 November 2012

CID: 401200



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 Arvinder Athwal
Attachment: Paediatrics Core Hospital
Hospital: Ealing Hospital
Date: 17 September 2012 to 2 November 2012

CID: 548458



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 Inmook Bae
Attachment: Paediatrics Core Hospital
Hospital: Ealing Hospital
Date: 17 September 2012 to 2 November 2012

CID: 467114



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:

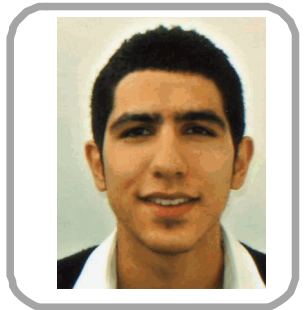
Please comment on suggested areas of improvement:

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 Bardia Barimani
Attachment: Paediatrics Core Hospital
Hospital: Chelsea and Westminster Hospital
Date: 17 September 2012 to 2 November 2012

CID: 549474



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 Stefan Bauer
Attachment: Paediatrics Core Hospital
Hospital: Chelsea and Westminster Hospital
Date: 17 September 2012 to 2 November 2012

CID: 513482



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 Grace Elisabeth Emily Britton
Attachment: Paediatrics Core Hospital
Hospital: Chelsea and Westminster Hospital
Date: 17 September 2012 to 2 November 2012

CID: 512676



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 Hannah Bryars
Attachment: Paediatrics Core Hospital
Hospital: St Mary's Hospital
Date: 17 September 2012 to 2 November 2012

CID: 452285



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 Samuel Byrne **CID:** 551899
Attachment: Paediatrics Core Hospital
Hospital: St Mary's Hospital
Date: 17 September 2012 to 2 November 2012



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

Student Name: Mr Samuel Chee
Attachment: Paediatrics Core Hospital
Hospital: Chelsea and Westminster Hospital
Date: 17 September 2012 to 2 November 2012

CID: 470599



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 Elise Yi Jin Chua
Attachment: Paediatrics Core Hospital
Hospital: Chelsea and Westminster Hospital
Date: 17 September 2012 to 2 November 2012

CID: 554029



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 Katerina Constantinou
Attachment: Paediatrics Core Hospital
Hospital: Chelsea and Westminster Hospital
Date: 17 September 2012 to 2 November 2012

CID: 554474



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 Lauren Crook
Attachment: Paediatrics Core Hospital
Hospital: North West London Hospitals
Date: 17 September 2012 to 2 November 2012

CID: 549354



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 Harriet Claire Davidson
Attachment: Paediatrics Core Hospital
Hospital: Chelsea and Westminster Hospital
Date: 17 September 2012 to 2 November 2012

CID: 707045



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 Frances E M Dixon
Attachment: Paediatrics Core Hospital
Hospital: North West London Hospitals
Date: 17 September 2012 to 2 November 2012

CID: 512538



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:

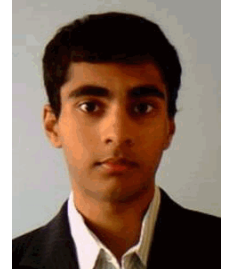
If unable to comment, please give reasons:

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 Agneish Dutta
Attachment: Paediatrics Core Hospital
Hospital: Ealing Hospital
Date: 17 September 2012 to 2 November 2012

CID: 552878



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)			