

Student Name: Mr Kshitiz Gandhi
Attachment: Paediatrics Core Hospital
Hospital: St Mary's Hospital
Date: 17 September 2012 to 2 November 2012

CID: 549536



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 Charlotte Louise Godfrey
Attachment: Paediatrics Core Hospital
Hospital: North West London Hospitals
Date: 17 September 2012 to 2 November 2012

CID: 548640



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 David Grainger
Attachment: Paediatrics Core Hospital
Hospital: Hillingdon Hospital
Date: 17 September 2012 to 2 November 2012

CID: 549189



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 Sonal Brindley Hapuarachi
Attachment: Paediatrics Core Hospital
Hospital: Ealing Hospital
Date: 17 September 2012 to 2 November 2012

CID: 551293



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 Annie Pan He
Attachment: Paediatrics Core Hospital
Hospital: St Mary's Hospital
Date: 17 September 2012 to 2 November 2012

CID: 549884



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. James William Iliff
Attachment: Paediatrics Core Hospital
Hospital: St Mary's Hospital
Date: 17 September 2012 to 2 November 2012

CID: 596802



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:

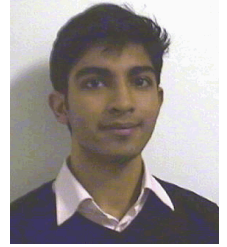
Please comment on suggested areas of improvement:

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 Azharhusein Janmohamed
Attachment: Paediatrics Core Hospital
Hospital: Chelsea and Westminster Hospital
Date: 17 September 2012 to 2 November 2012

CID: 554630



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"/>	Date: _____	

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

CID: 548741



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

CID: 549224



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 Jalpa Kotecha
Attachment: Paediatrics Core Hospital
Hospital: Chelsea and Westminster Hospital
Date: 17 September 2012 to 2 November 2012

CID: 700961



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 Avni Kothari
Attachment: Paediatrics Core Hospital
Hospital: Chelsea and Westminster Hospital
Date: 17 September 2012 to 2 November 2012

CID: 551647



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:

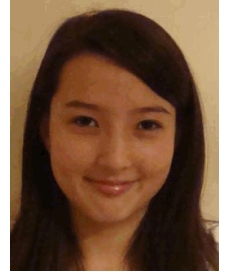
If unable to comment, please give reasons:

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 Melanie Laura Kwan
Attachment: Paediatrics Core Hospital
Hospital: Chelsea and Westminster Hospital
Date: 17 September 2012 to 2 November 2012

CID: 553973



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

CID: 548562



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)			