Meets Expectations

Below Expectations (You MUST give comments)

Borderline

Signature:

Year 5 Paediatrics Residency Assessment

Student Name: Mr Amogh Acharya CID: 549240

Attachment: Paediatrics Residency
Hospital: Watford General Hospital
Date: 18 March 2013 to 29 March 2013



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:	
ΡI	Please indicate the student's overall performance during residency	
		nt Signature

Date:

Date:

Year 5 Paediatrics Residency Assessment

Student Name: Mr Riaz Ali CID: 552308

Attachment: Paediatrics Residency
St Peter's Hospital

Date: 18 March 2013 to 29 March 2013



Supervisor / Tutor's feedback:

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

Year 5 Paediatrics Residency Assessment

Student Name: Mr Nicholas Andreou CID: 507440

Attachment: Paediatrics Residency St Mary's Hospital

Date: 18 March 2013 to 29 March 2013



Supervisor / Tutor's feedback:

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

Year 5 Paediatrics Residency Assessment

Student Name: Mr Sathyan Balaji CID: 549426

Attachment: Paediatrics Residency Conquest Hospital

Date: 18 March 2013 to 29 March 2013



Supervisor / Tutor's feedback:

Please comment on the student's strengths:
Please comment on the student's strengths:
Please comment on suggested areas of improvement:
riease comment on suggested areas of improvement.
If unable to comment, please give reasons:

Please indicate the student's overall performance during residency					
Above Expectations		Supervisor / Tutor's Name:		Student Signature	
Meets Expectations					
Borderline		Signature:	Date:		
Below Expectations (You MUST give comments)				Date:	

Meets Expectations

Below Expectations

(You MUST give comments)

Borderline

Signature:

Year 5 Paediatrics Residency Assessment

Student Name: Mr Richard Barlow CID: 551150

Attachment: Paediatrics Residency Hillingdon Hospital

Date: 18 March 2013 to 29 March 2013



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:	
PΙ	ease indicate the student's overall performance during residency	
	Above Expectations Supervisor / Tutor's Name:	Student Signature

Date:

Date:

Year 5 Paediatrics Residency Assessment

CID: 642038

Student Name: Miss Paige Barrows

Attachment: Paediatrics Residency Southend Hospital

Date: 18 March 2013 to 29 March 2013



Supervisor / Tutor's feedback:

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

Year 5 Paediatrics Residency Assessment

Student Name: Mr Harsh Pragnesh Bhatt CID: 510954

Attachment: Paediatrics Residency
West Middlesex Hospital

Date: 18 March 2013 to 29 March 2013



Supervisor / Tutor's feedback:

Please comment on the student's strengths:
Please comment on the student's strengths:
Please comment on suggested areas of improvement:
riease comment on suggested areas of improvement.
If unable to comment, please give reasons:

Please indicate the student's overall performance during residency					
Above Expectations		Supervisor / Tutor's Name:		Student Signature	
Meets Expectations					
Borderline		Signature:	Date:		
Below Expectations (You MUST give comments)				Date:	

Year 5 Paediatrics Residency Assessment

Student Name: Mr Tom Burgess CID: 552606

Attachment: Paediatrics Residency Medway Hospital

Date: 18 March 2013 to 29 March 2013



Supervisor / Tutor's feedback:

7	Please comment on the student's strengths:	
	Please comment on suggested areas of improvement:	
	If week is to comment whose give week as	
	If unable to comment, please give reasons:	

Please indicate the student's overall performance during residency					
Above Expectations		Supervisor / Tutor's Name:		Student Signature	
Meets Expectations					
Borderline		Signature:	Date:		
Below Expectations (You MUST give comments)				Date:	

Year 5 Paediatrics Residency Assessment

Student Name: Mr Hyoung-Jin Cho CID: 550645

Attachment: Paediatrics Residency West Middlesex Hospital

Date: 18 March 2013 to 29 March 2013



Supervisor / Tutor's feedback:

Please comment on the student's strengths:	
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Please comment on suggested areas of improvement:	
If unable to comment, please give reasons:	

Please indicate the student's overall performance during residency					
Above Expectations		Supervisor / Tutor's Name:		Student Signature	
Meets Expectations					
Borderline		Signature:	Date:		
Below Expectations (You MUST give comments)				Date:	

Year 5 Paediatrics Residency Assessment

Student Name: Miss Charlotte Sarah Colley CID: 548612

Attachment: Paediatrics Residency St Mary's Hospital

Date: 18 March 2013 to 29 March 2013



Supervisor / Tutor's feedback:

Please comment on suggested areas of improvement:	
If unable to comment, please give reasons:	

Please indicate the student's overall performance during residency					
Above Expectations		Supervisor / Tutor's Name:		Student Signature	
Meets Expectations					
Borderline		Signature:	Date:		
Below Expectations (You MUST give comments)				Date:	

Year 5 Paediatrics Residency Assessment

Student Name: Miss Suny Coscione CID: 549360

Attachment: Paediatrics Residency St Mary's Hospital

Date: 18 March 2013 to 29 March 2013



Supervisor / Tutor's feedback:

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

Year 5 Paediatrics Residency Assessment

Student Name: Mr Rory Cuthbert CID: 549108

Attachment: Paediatrics Residency

Hospital: Milton Keynes General Hospital

Date: 18 March 2013 to 29 March 2013



Supervisor / Tutor's feedback:

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

Year 5 Paediatrics Residency Assessment

Student Name: Mr Abbas Merali Dewji CID: 549223

Attachment: Paediatrics Residency St Mary's Hospital

Date: 18 March 2013 to 29 March 2013



Supervisor / Tutor's feedback:

Please comment on the student's strengths:	١
Please comment on suggested areas of improvement:	
If unable to comment, please give reasons:	

Please indicate the student's overall performance during residency					
Above Expectations		Supervisor / Tutor's Name:		Student Signature	
Meets Expectations					
Borderline		Signature:	Date:		
Below Expectations (You MUST give comments)				Date:	

Year 5 Paediatrics Residency Assessment

Student Name: Miss Payal Mukul Dube CID: 707047

Attachment: Paediatrics Residency Ealing Hospital

Date: 18 March 2013 to 29 March 2013



Supervisor / Tutor's feedback:

Please comment on the student's strengths:	١
Please comment on suggested areas of improvement:	
If unable to comment, please give reasons:	

Please indicate the student's overall performance during residency					
Above Expectations		Supervisor / Tutor's Name:		Student Signature	
Meets Expectations					
Borderline		Signature:	Date:		
Below Expectations (You MUST give comments)				Date:	

Year 5 Paediatrics Residency Assessment

Student Name: Mr Ali Eker Moustafa CID: 555839

Attachment: Paediatrics Residency
Hospital: Queen Alexandra Hospital
Date: 18 March 2013 to 29 March 2013



Supervisor / Tutor's feedback:

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

Year 5 Paediatrics Residency Assessment

Student Name: Mr Michael Anthony Foster CID: 508519

Attachment: Paediatrics Residency Royal Berkshire Hospital

Date: 18 March 2013 to 29 March 2013



Supervisor / Tutor's feedback:

Please comment on the student's strengths:		
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Please comment on suggested areas of improvement:		
If unable to comment, please give reasons:		
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Please indicate the student's overall performance during residency					
Above Expectations		Supervisor / Tutor's Name:		Student Signature	
Meets Expectations					
Borderline		Signature:	Date:		
Below Expectations (You MUST give comments)				Date:	

Year 5 Paediatrics Residency Assessment

Student Name: Miss Kristen Foxwell CID: 502439

Attachment: Paediatrics Residency Southend Hospital

Date: 18 March 2013 to 29 March 2013



Supervisor / Tutor's feedback:

Please comment on the student's strengths:	
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Please comment on suggested areas of improvement:	ı
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If unable to comment, please give reasons:	ı
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Please indicate the student's overall performance during residency					
Above Expectations		Supervisor / Tutor's Name:		Student Signature	
Meets Expectations					
Borderline		Signature:	Date:		
Below Expectations (You MUST give comments)				Date:	