

Student Name: Miss Vinothini Manivasagam
Attachment: Paediatrics Residency
Hospital: Southend Hospital
Date: 18 March 2013 to 29 March 2013

CID: 707079



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:

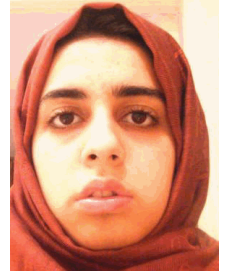
Please comment on suggested areas of improvement:

If unable to comment, please give reasons:

Please indicate the student's overall performance during residency			
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"/>	Date:	

Student Name: Miss Soudeh Mashayekhi
Attachment: Paediatrics Residency
Hospital: Northwick Park Hospital
Date: 18 March 2013 to 29 March 2013

CID: 513445



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 residency			
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"/>	Date:	

Student Name: Miss Sara Mehr
Attachment: Paediatrics Residency
Hospital: Hillingdon Hospital
Date: 18 March 2013 to 29 March 2013

CID: 514036



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

Student Signature

Student Name: Mr. Foad Mohamed
Attachment: Paediatrics Residency
Hospital: Conquest Hospital
Date: 18 March 2013 to 29 March 2013

CID: 513357



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 residency		
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 (You MUST give comments)	<input type="checkbox"/>	

Student Name: Mr Malik Moledina
Attachment: Paediatrics Residency
Hospital: Stoke Mandeville Hospital
Date: 18 March 2013 to 29 March 2013

CID: 554104



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.

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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	<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 Seethalakshmi Muthalagappan

CID: 549873

Attachment: Paediatrics Residency

Hospital: Hillingdon Hospital

Date: 18 March 2013 to 29 March 2013



Supervisor / Tutor's feedback:

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Please comment on suggested areas of improvement:

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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 (You MUST give comments)	<input type="checkbox"/>	

Student Name: Mr Uzoma Nnajiuba
Attachment: Paediatrics Residency
Hospital: Southend Hospital
Date: 18 March 2013 to 29 March 2013

CID: 548735



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:

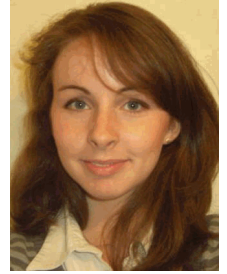
Please comment on suggested areas of improvement:

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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 Aislinn O'Malley
Attachment: Paediatrics Residency
Hospital: Horton Hospital
Date: 18 March 2013 to 29 March 2013

CID: 552929



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 residency				
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"/>	Date:		

Student Name: Miss Alice Victoria Emily Page
Attachment: Paediatrics Residency
Hospital: Medway Hospital
Date: 18 March 2013 to 29 March 2013

CID: 555372



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.

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Please comment on suggested areas of improvement:

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

Student Name: Mr Krishan Patel
Attachment: Paediatrics Residency
Hospital: Hammersmith Hospital
Date: 18 March 2013 to 29 March 2013

CID: 555157



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.

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

Student Name: Miss Priyadarshini Paul
Attachment: Paediatrics Residency
Hospital: St Mary's Hospital
Date: 18 March 2013 to 29 March 2013

CID: 508928



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.

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Please comment on suggested areas of improvement:

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Please indicate the student's overall performance during residency			
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Meets Expectations	<input type="checkbox"/>	Signature: _____ Date: _____	
Borderline	<input type="checkbox"/>		
Below Expectations (You MUST give comments)	<input type="checkbox"/>		

Student Name: Mr Frederick Pimm
Attachment: Paediatrics Residency
Hospital: West Middlesex Hospital
Date: 18 March 2013 to 29 March 2013

CID: 552987



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.

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

Student Name: Miss Alexa Jasmine Prichard
Attachment: Paediatrics Residency
Hospital: Horton Hospital
Date: 18 March 2013 to 29 March 2013

CID: 548645



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.

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Please comment on suggested areas of improvement:

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

Student Name: Mr Karan Rangarajan
Attachment: Paediatrics Residency
Hospital: Kingston Hospital
Date: 18 March 2013 to 29 March 2013

CID: 551102



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.

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Please comment on suggested areas of improvement:

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Please indicate the student's overall performance during residency			
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Meets Expectations	<input type="checkbox"/>	Signature: _____ Date: _____	
Borderline	<input type="checkbox"/>		
Below Expectations (You MUST give comments)	<input type="checkbox"/>		

Student Name: Ms. Anna Robinson
Attachment: Paediatrics Residency
Hospital: Ninewells Hospital
Date: 18 March 2013 to 29 March 2013

CID: 644414



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.

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