Imperial College London

CID: 511207

Student Name:Mr Adeel AftabAttachment:RadiologyHospital:Hammersmith HospitalDate:27 May 2013 to 31 May 2013



	A	CTIVITY		DATE	STAFF SIGNATURE			
Yes	Borderline	No	Professionalism Has the student met th	ne requirements for the fo	llowing areas of professionalism:			
			Appearance	Commente				
			Reliability and attendance					
			Respect for patients					
			Working with colleag					

Please indicate if the student has completed all relevant in-course assessments and satisfactorily passed the attachment.					
Above Expectations		Consultant Name:		Student Signature	
Meets Expectations					
Borderline		Signature:	Date:		
Below Expectations				Date:	

Imperial College London

CID: 555917

Student Name: Mr Ruzky Aliyar Attachment: Radiology Hospital: Date:

Hammersmith Hospital 27 May 2013 to 31 May 2013

ACTIVITY			,	DATE	STAFF SIGNATURE		
Yes	Borderline	No	Professionalism Has the student met		ollowing areas of professionalism:		
			Appearance Comment:				
			Reliability and attendance				
			Respect for patients				
			Working with collea	agues			

Please indicate if the student has completed all relevant in-course assessments and satisfactorily passed the attachment.						
Above Expectations		Consultant Name:		Student Signature		
Meets Expectations						
Borderline		Signature:	Date:			
Below Expectations				Date:		

.

Student Name: Attachment: Hospital: Date:

Imperial College London

> Mr David Atefi Radiology Charing Cross Hospital 27 May 2013 to 31 May 2013



ACTIVITY				DATE	STAFF SIGNATURE			
Yes	Borderline	No	Professionalism Has the student met	t the requirements for the f	ollowing areas of professionalism:			
			Appearance	Has the student met the requirements for the following areas of professionalism: Appearance Comment:				
			Reliability and attendance					
				Respect for patients				
			Working with colle	agues				

Please indicate if the student has completed all relevant in-course assessments and satisfactorily passed the attachment.						
Above Expectations		Consultant Name:		Student Signature		
Meets Expectations						
Borderline		Signature:	Date:			
Below Expectations				Date:		

Year 5 Radiology Assessment Form

CID: 550430

Student Name: Attachment: Hospital: Date: Miss Najah Baqai Radiology St Mary's Hospital 27 May 2013 to 31 May 2013



	Α	CTIVITY		DATE	STAFF SIGNATURE			
Yes	Borderline	No	Professionalism Has the student met	the requirements for the for	ollowing areas of professionalism:			
			Appearance	Commont				
			Reliability and attendance					
			Respect for patients					
			Working with colle	agues				

Please indicate if the student has completed all relevant in-course assessments and satisfactorily passed the attachment.						
Above Expectations		Consultant Name:		Student Signature		
Meets Expectations						
Borderline		Signature:	Date:			
Below Expectations				Date:		

Imperial College London

CID: 467343

Student Name: Miss Nikola Baty Attachment: Hospital: Date:

Radiology Northwick Park Hospital 27 May 2013 to 31 May 2013

ACTIVITY				DATE	STAFF SIGNATURE		
Yes	Borderline	No	Professionalism Has the student met	the requirements for the for	ollowing areas of professionalism:		
			Appearance Comment:				
			Reliability and attendance				
			Respect for patients				
			Working with collea				

Please indicate if the student has completed all relevant in-course assessments and satisfactorily passed the attachment.					
Above Expectations		Consultant Name:		Student Signature	
Meets Expectations					
Borderline		Signature:	Date:		
Below Expectations				Date:	

Imperial College London

CID: 638619

Student Name: Attachment: Hospital: Date: Miss Sophie Boyd Radiology Central Middlesex Hospital 27 May 2013 to 31 May 2013

ACTIVITY				DATE	STAFF SIGNATURE			
Yes	Borderline	No	Professionalism Has the student met	the requirements for the fo	llowing areas of professionalism:			
			Appearance	Commont				
			Reliability and attendance					
			Respect for patients					
			Working with collea	agues				

Please indicate if the student has completed all relevant in-course assessments and satisfactorily passed the attachment.					
Above Expectations		Consultant Name:		Student Signature	
Meets Expectations					
Borderline		Signature:	Date:		
Below Expectations				Date:	

CID: 551166

Student Name: Attachment: Hospital: Date:

Imperial College London

Miss Sarah Burns Radiology Charing Cross Hospital 27 May 2013 to 31 May 2013



ACTIVITY				DATE	STAFF SIGNATURE		
Yes	Borderline	No	Professionalism Has the student met t	Professionalism Has the student met the requirements for the following areas of professionalism:			
			Appearance Comment:				
			Reliability and attendance				
			Respect for patients				
			Working with collea	Working with colleagues			

Please indicate if the student has completed all relevant in-course assessments and satisfactorily passed the attachment.					
Above Expectations		Consultant Name:		Student Signature	
Meets Expectations					
Borderline		Signature:	Date:		
Below Expectations				Date:	

Year 5 Radiology Assessment Form

Student Name:Mr Huan Chien ChanAttachment:RadiologyHospital:St Mary's HospitalDate:27 May 2013 to 31 May 2013



	A	CTIVITY		DATE	STAFF SIGNATURE	
Yes	Borderline	No	Professionalism Has the student met t	Professionalism Has the student met the requirements for the following areas of professionalism:		
			Appearance Comment:			
			Reliability and attendance			
			Respect for patients			
			Working with collea			

Please indicate if the student has completed all relevant in-course assessments and satisfactorily passed the attachment.					
Above Expectations		Consultant Name:		Student Signature	
Meets Expectations					
Borderline		Signature:	Date:		
Below Expectations				Date:	

Imperial	College
London	-

Student Name:Miss Amani Aleem ChowdhuryAttachment:RadiologyHospital:Central Middlesex HospitalDate:27 May 2013 to 31 May 2013



ACTIVITY			,	DATE	STAFF SIGNATURE		
Yes	Borderline	No	Professionalism Has the student met the requirements for the following areas of professionalism:				
			Appearance Comment:				
			Reliability and attendance				
			Respect for patients				
			Working with colle				

Please indicate if the student has completed all relevant in-course assessments and satisfactorily passed the attachment.					
Above Expectations		Consultant Name:		Student Signature	
Meets Expectations					
Borderline		Signature:	Date:		
Below Expectations				Date:	

Year 5 Radiology Assessment Form

Student Name:Mr Michael James ColwillAttachment:RadiologyHospital:St Mary's HospitalDate:27 May 2013 to 31 May 2013

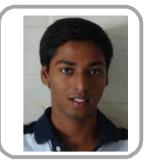


ACTIVITY				DATE	STAFF SIGNATURE
Yes	Borderline	No	Professionalism Has the student met	the requirements for the for	ollowing areas of professionalism:
			Appearance Comment: Reliability and attendance Respect for patients		
			Working with colle	agues	

Please indicate if the student has completed all relevant in-course assessments and satisfactorily passed the attachment.					
Above Expectations		Consultant Name:		Student Signature	
Meets Expectations					
Borderline		Signature:	Date:		
Below Expectations				Date:	

Year 5 Radiology Assessment Form

Student Name:Mr Karthik DarmasseelaneAttachment:RadiologyHospital:St Mary's HospitalDate:27 May 2013 to 31 May 2013



	A	CTIVITY		DATE	STAFF SIGNATURE		
Yes	Borderline	No	Professionalism Has the student met	the requirements for the for	blowing areas of professionalism:		
			Appearance Comment:				
			Reliability and attendance Respect for patients				
			Working with colle	Working with colleagues			

Please indicate if the student has completed all relevant in-course assessments and satisfactorily passed the attachment.					
Above Expectations		Consultant Name:		Student Signature	
Meets Expectations					
Borderline		Signature:	Date:		
Below Expectations				Date:	

Year 5 Radiology Assessment Form

CID: 551940

Student Name:Mr NillAttachment:RadicHospital:ChariDate:27 Ma

Mr Niall Durrant Radiology Charing Cross Hospital 27 May 2013 to 31 May 2013

ACTIVITY				DATE	STAFF SIGNATURE		
Yes	Borderline	No	Professionalism Has the student met	Professionalism Has the student met the requirements for the following areas of professionalism:			
			Appearance Comment: Reliability and attendance Comment:				
			Respect for patients				
			Working with colle	Working with colleagues			

Please indicate if the student has completed all relevant in-course assessments and satisfactorily passed the attachment.								
Above Expectations		Consultant Name:		Student Signature				
Meets Expectations								
Borderline		Signature:	Date:					
Below Expectations				Date:				

Imperial College London

CID: 551842

Student Name:
Attachment:
Hospital:
Date:Mr Jack FaulknerRadiology
Chelsea and Westminster Hospital
27 May 2013 to 31 May 2013

ACTIVITY				DATE	STAFF SIGNATURE			
Yes	Borderline	No	Professionalism Has the student met the requirements for the following areas of professionalism: Appearance Comment:					
			Reliability and attendance					
			Respect for patients					
			Working with colleagues					

Please indicate if the student has completed all relevant in-course assessments and satisfactorily passed the attachment.							
Above Expectations		Consultant Name:	Student Signature				
Meets Expectations							
Borderline		Signature:	Date:				
Below Expectations				Date:			