**\*\*This form is to be completed by the graduate student\*\***

**University of Florida**

**Master of Health Science**

**One Health Field Research Experience**

**Student Evaluation of Preceptor Form**

**Master of Public Health**

Agency and Preceptor Evaluation Form

Student’s name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Project start date (mm/dd/yy): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Estimated hours you spent in the field working on project: \_\_\_\_\_\_\_

Estimated total effort hour hours you spent working on project: \_\_\_\_\_\_\_

Preceptor’s agency: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Preceptor’s name, credentials, position/title:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**5 = Excellent 2 = Below Average**

**4 = Good 1 = Poor**

**3 = Average N/A = Not Applicable**

**Evaluation Items**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| 1. Expression of expectations of graduate student  | 5 | 4 | 3 | 2 | 1 | N/A |
| 2. Expression of project goals and objectives  | 5 | 4 | 3 | 2 | 1 | N/A |
| 3. Provided tools for successful completion of the job  | 5 | 4 | 3 | 2 | 1 | N/A |
| 4. Ability to delegate appropriate tasks | 5 | 4 | 3 | 2 | 1 | N/A |
| 5. Encouraged creative and independent thinking  | 5 | 4 | 3 | 2 | 1 | N/A |
| 6. Respect and concern for graduate student  | 5 | 4 | 3 | 2 | 1 | N/A |
| 7. Flexibility  | 5 | 4 | 3 | 2 | 1 | N/A |
| 8. Demonstrated leadership qualities  | 5 | 4 | 3 | 2 | 1 | N/A |
| 9. Overall contribution to the professional development of the graduate student  | 5 | 4 | 3 | 2 | 1 | N/A |
| 10.Overall rating of the preceptor  | 5 | 4 | 3 | 2 | 1 | N/A |
| 11. Overall rating of organization | 5 | 4 | 3 | 2 | 1 | N/A |

Please describe how you employed One Health principals in your field research experience?

Will your One Health field research experience lead to any scientific presentations or publications? If yes, please describe them here.

Would you recommend this internship site to another student? \_\_\_\_\_ Why or why not?

Suggestions to improve the field research experience training:

Please return this completed form to HPNP 4160 or email your Academic Coordinator.