

### Student's Evaluation of Pharmacy Resident on Service.

PY4 Pharm.D. students assigned a UKMC rotation with a resident are required to complete an evaluation form for that resident. Please fill out this form and provide it to your preceptor.

#### Student's Evaluation of Pharmacy Resident on Service

Month: \_\_\_\_\_ Rotation: \_\_\_\_\_  
 Resident: \_\_\_\_\_ Student: \_\_\_\_\_

- **Once completed, return this form to your preceptor.**
- Please complete the following assessment items to provide feedback to your resident about his/her teaching skills. Your responses will be reported in a group format every three months with other student responses.

1. Please rate the resident's general teaching skills.
 

Poor					Excellent	
1	2	3	4	5		NA
  
2. The resident stimulated me to learn more about pharmacy.
 

Strongly Disagree					Strongly Agree	
1	2	3	4	5		NA
  
3. The resident was readily available to assist me when I needed.
 

Strongly Disagree					Strongly Agree	
1	2	3	4	5		NA
  
4. The resident provides me with constructive feedback to help me learn.
 

Strongly Disagree					Strongly Agree	
1	2	3	4	5		NA
  
5. The resident clearly communicated expectations for what I was to do on this rotation.
 

Strongly Disagree					Strongly Agree	
1	2	3	4	5		NA
  
6. The resident is an excellent role model for students.
 

Strongly Disagree					Strongly Agree	
1	2	3	4	5		NA

Please make recommendations as to how the resident can improve his/her teaching:

Other comments about the resident's teaching skills: