STUDENT CLINICAL AND PROFESSIONAL DEVELOPMENT GOALS
Department of Speech-Language Pathology
University of Toronto

Instructions: This form is to be filled out by the student following the final evaluation for all placement units. Students will maintain a copy of this form and bring to the next placement where it can be used to help complete the Clinical Practicum Contract. After the final placement, these goals can be incorporated into future professional development or mentorship plans.

STUDENT NAME: ____________________________  COURSE NUMBER: ____________________________

YEAR:  □  Year I  □  Year II  CURRENT DATE: ____________________________

1. Strengths in present placement as mutually identified by the formal evaluation and discussion within the clinical placement.

(a) __________________________________________________________

(b) __________________________________________________________

(c) __________________________________________________________

2. Goals for future placements as identified by the evaluation and discussions (including areas which were not covered in any depth, areas of particular interest, etc.)

(a) __________________________________________________________

(b) __________________________________________________________

(c) __________________________________________________________

Site Name: ______________________________________________________

CE Signature: ____________________  Std Signature: ____________________