

Clinical Progress Alert

Radiologic Technology Program



To: _____
(Clinical Coordinator/Program Director)

From: _____
(Clinical Instructor)

Student: _____

Date: _____

Please use this form to inform the Clinical Coordinator or Program Director of a potential problem that a student in your clinical setting may have. **Early detection** of student problems is critical in helping the student find an adequate solution to his/her situation.

- _____ Irregular Attendance
- _____ Declining quality of work
- _____ Declining quantity of work
- _____ Inability to complete competencies required
- _____ Poor motivation
- _____ Poor attitude toward work
- _____ Poor attitude toward co-workers/fellow students
- _____ Confidentiality issues
- _____ Safety issues
- _____ Lack of self-confidence
- _____ _____
(Other)

Other clinical instructor comments:

Follow-up conference with student:

Student's Signature: _____

Date: _____

Clinical Coordinators or Program Director's Signature: _____

Date: _____