## Imperial Valley College AHP 086, Medical Assistant Clinical Externship II Time Sheet/Evaluation

Student's Name: \_\_\_\_\_

Externship Site: \_\_\_\_\_

DATE	IN	OUT	IN	OUT	HOURS

Week No				Total Hours:			
รเ	JPERVISOR'S EVALI		F STUDENT' <b>)OR</b>	S PERFORMAN AVERAGE		LLENT	
1.	Grooming/Hygiene	1	2	3	4	5	
2.	Following directions	1	2	3	4	5	
3.	Communication	1	2	3	4	5	
4.	Quality of work	1	2	3	4	5	
5.	Work quantity	1	2	3	4	5	
6.	Dependability	1	2	3	4	5	
7.	Work relationships	1	2	3	4	5	
8.	Personal behavior	1	2	3	4	5	
9.	Attendance	1	2	3	4	5	

## Comments: \_\_\_\_\_

I certify that I have worked on these days and hours.

Student's Signature:	Date:		
I certify that the student named above worked the days an	d hours stated.		
Supervisor's Signature:	Date:		