

# INTERNSHIP EVALUATION FORM 2010/2011G (1431-1432H)



INTERN'S NAME: .....

□ QUADRANT ONE			□ QUADRANT TWO			□ QUADRANT THREE			□ QUADRANT FOUR		
31 JULY – 29 OCTOBER, 2010			30 OCT, 2010– 28 JANUARY, 2011			29 JANUARY – 29 APRIL, 2011			30 APRIL – 29 JULY, 2011		
□ LABORATORY:			□ LABORATORY:			□ LABORATORY:			□ LABORATORY:		
□ ATTENDANCE	10		□ ATTENDANCE	10		□ ATTENDANCE	10		□ ATTENDANCE	10	
□ BEHAVIOUR	10		□ BEHAVIOUR	10		□ BEHAVIOUR	10		□ BEHAVIOUR	10	
□ KNOWLEDGE	10		□ KNOWLEDGE	10		□ KNOWLEDGE	10		□ KNOWLEDGE	10	
□ PRE-ANALYTICAL	10		□ PRE-ANALYTICAL	10		□ PRE-ANALYTICAL	10		□ PRE-ANALYTICAL	10	
□ ANALYTICAL SKILLS	20		□ ANALYTICAL SKILLS	20		□ ANALYTICAL SKILLS	20		□ ANALYTICAL SKILLS	20	
□ POST ANALYTICAL	10		□ POST ANALYTICAL	20		□ POST ANALYTICAL	20		□ POST ANALYTICAL	20	
□ SAFETY / QUALITY	10		□ SAFETY / QUALITY	10		□ SAFETY / QUALITY	10		□ SAFETY / QUALITY	10	
□ OTHERS	10		□ OTHERS	10		□ OTHERS	10		□ OTHERS	10	
□ OVERALL EVALUATION	10		□ OVERALL EVALUATION	10		□ OVERALL EVALUATION	10		□ OVERALL EVALUATION	10	
TOTAL	100%		TOTAL	100%		TOTAL	100%		TOTAL	100%	
□ COMMENTS			□ COMMENTS			□ COMMENTS			□ COMMENTS		
■ LAB SUPERVISOR			■ LAB SUPERVISOR			■ LAB SUPERVISOR			■ LAB SUPERVISOR		
■ HEAD, DEPARTMENT			■ HEAD, DEPARTMENT			■ HEAD, DEPARTMENT			■ HEAD, DEPARTMENT		
■ INTERN			■ INTERN			■ INTERN			■ INTERN		
□ ORIENTATION PROGRAM	ATTEND 15% BONUS	DID NOT ATTEND	□ MEDICAL RECORD	□ INTERNSHIP BADGE		HOSPITAL OFFICIAL STAMP			Dr. Mohammed H. Saiemaldahr  Vice Dean of Clinical Affairs		
Faculty Department Coordinator					DATE: / / 20						

