DEPARTMENT OF MEDICAL & RESEARCH TECHNOLOGY
UNIVERSITY OF MARYLAND SCHOOL OF MEDICINE

FINAL EXTERNSHIP EVALUATION

Student: ___________________________ Evaluation Date: ______________
Rotation Number: ________     Externship Site: ____________________________

The primary objective of this assessment is to ensure that each student enters the Biotechnology profession with an understanding of its behavioral and skill standards by demonstrating adherence to those standards. Circle the number, which corresponds to the student’s performance in each category using the following rating scale as a guide:

1. **Fails to Meet Standards** – Performance is below entry-level expectations. Student does not meet minimum standards. Performance is unacceptable.

2. **Below Standards** – Performance is marginally below entry-level expectations. Student needs to improve to meet minimum standards.

3. **Meets Standards** – Meets entry-level expectations and minimum standards.

4. **Above Standards** – Consistently meets entry-level expectations and minimum standards. Excels in certain areas. Student has demonstrated a high level of initiative and independent functioning.

5. **Exceeds Standards** – Clearly outstanding. Consistently exceeds entry-level expectations and minimum standards. Student has demonstrated a high level of initiative and independent functioning.
STANDARDS OF PRACTICE

- **KNOWLEDGE**
  - Demonstrates understanding of basic theoretical concepts.
  - Demonstrates knowledge of good laboratory practices.
  - Demonstrates knowledge of experimental design and procedures.
  - Demonstrates understanding of scientific methodology.
  - Analyzes and interprets data appropriately at an entry level.

- **TECHNIQUE**
  - Displays technical dexterity and accuracy.
  - Completes assigned tasks within an acceptable time frame.
  - Accomplishes tasks with minimal supervision.
  - Reports accurately and efficiently.
  - Demonstrates appropriate entry-level troubleshooting skills.
**PROFESSIONAL STANDARDS**

- **INITIATIVE AND INTEREST**
  - Attentive to instructions; listens well and asks pertinent questions.
  - Actively participates in performing assigned tasks.
  - Prepares adequately for the days laboratory experience.
  - Functions as a self-starter in appropriate situations.

- **RESPONSIBILITY**
  - Accountable for work assigned including willingness to take extra time to complete a task when necessary and seeking help when appropriate.
  - Acknowledges errors and takes appropriate action such as notifying the preceptor.

- **ADAPTABILITY**
  - Accepts constructive criticism and modifies behavior accordingly.
  - Flexible when schedule of daily learning activities is modified.
• COMMUNICATION AND DOCUMENTATION

- Maintains notebooks, records, and logs accurately.
- Demonstrates effective oral communication.
- Demonstrates effective written communication.
- Demonstrates proficiency in computer applications.
- Promotes a cooperative working environment with other professionals.

• ADHERENCE TO POLICIES

- Adheres to institutional policies.
  - Yes
  - No
  - N/A

- Adheres to established scheduling policies of the institution.
  - Yes
  - No
  - N/A

- Complies with institution’s laboratory safety policies, procedures and regulatory standards.
  - Yes
  - No
  - N/A

- Maintains institutional confidentiality.
  - Yes
  - No
  - N/A

- Adheres to UMB affiliate policies on the use of IT resources (computers, Internet, etc.)
  - Yes
  - No
  - N/A
OVERALL SUMMARY
Please rank student’s overall performance:

<table>
<thead>
<tr>
<th></th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
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<tbody>
<tr>
<td></td>
<td>FAILS TO MEET STANDARDS</td>
<td>BELOW STANDARDS</td>
<td>MEETS STANDARDS</td>
<td>ABOVE STANDARDS</td>
<td>EXCEEDS STANDARDS</td>
</tr>
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</table>

COMMENTS:

I recommend that the student receive a final evaluation of:

____ Passing with Excellence
____ Passing
____ Failing

Days Absent _____   Days Tardy _____  Days Made-up ____

Evaluated by: _______________________________ ______________ __________
Affiliate Signature    Title     Date

Evaluated by: _______________________________ ______________ __________
Affiliate Signature    Title     Date

• I have reviewed this evaluation and agree with it’s content:

___________________________________________  _______________
Student Signature       Date

STUDENT COMMENTS:
Final Evaluation By DMRT:

____ Passing with Excellence

____ Passing

____ Failing

Days Absent _____  Days Tardy _____  Days Made-up _____

________________________________________   _____________
Program Director       Date