Characteristics Evaluation

The following section contains several characteristics essential to success in a pharmacy residency training program. Rate the level(s) this candidate exhibited these characteristics using the scale below.

	Not Observed	fails to meet expectations (1)	Room for improvement (2)	Meets expectations (3)	exceeds expectations (4)	exceeds expectations (5)
* Writing						
* Oral communication						
* Leadership/Mentoring skills						
* Assertiveness						
* Organization and time management						
* Ability to prioritize and meet deadlines						
* Ability to work with peers						
* Problem-solving						
* Effective patient interaction						
* Dependability						
* Independence and resourcefulness						
* Ability to accept constructive criticism						
* Emotional stability and maturity						
* Professionalism (attire and demeanor)						

Reference Relationship and Narrative Comments

* What was (or is) the nature of your relationship to the candidate?

Answer the questions below about your relationship to the candidate, your experiences during your interactions, as well as additional comments on two strengths and two areas of improvement for this candidate.

Scroll down for more dropdown options.	
Choose an option	\$
If you selected 'Other", please describe the nature of your relationship with the candidate.	
* Where did your interaction with the candidate occur? Scroll down for more dropdown options.	
Choose an option	\$
If you selected 'Other", please describe when your interaction with the candidate occurred.	
* If you were the candidate's preceptor, how many learners do you precept a year (on average Scroll down for more dropdown options. Please select 'N/A' if you were not the candidate's	
Choose an option	\$
* How long did you interact with the candidate (in months)?	
* What was the relative time of your interactions with the candidate (per week, in hours)?	
* When in the candidate's training cycle did you precept the candidate? (e.g., First Rotation Please answer 'N/A' if you were not the candidate's preceptor.	Block, End of Training Year)
* If you were the candidate's employer or supervisor, in what setting did you manage the ca Pharmacy, Hospital Pharmacy, Other) Please answer 'N/A' if you were not the candidate's preceptor.	ndidate? (e.g., Community

health crisis, staff/faculty/preceptor shortage, or "business as usual"?
0/1000
* How often did you directly observe the candidate's clinical activities?
Please answer 'N/A' if you were did not work with the candidate in a clinical setting.
0/1000
* How much independence was the candidate was given? Was it reduced or increased over the duration of your interaction with the candidate?
0/1000
,
* How did the candidate's performance compare to other candidates?
0/1000
* Enter two of this candidate's strengths and describe how you believe these strengths will be beneficial to the candidate's
success in a residency program.
Please reference characteristics you rated as "Consistently Exceeds Expectations" in the previous section.
0/2000
* Enter two areas of improvement for this candidate and describe how you believe a residency program will improve these
areas.
Please reference characteristics you rated as "Room for Improvement" in the previous section.

0/2000

* Describe the circumstances when you interacted with the candidate. For example, was it during a holiday season, national

Recommendation

Please provide an overall recommendation for the candidate.

Scroll down for more dropdown options.

* Recommendation Concerning Admission

Choose an option		\$
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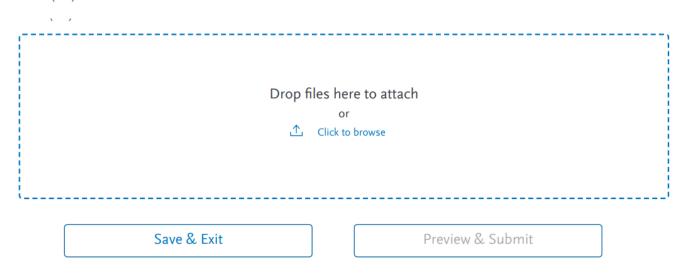
Letter of Recommendation

If you would like to include a Letter of Recommendation, you may upload 1 document.

Upload your file here.

Upload the letter below

Note: the file in Microsoft Word (.doc or .docx), Portable Document Format (.pdf), Rich Text Format (.rtf), or Plain Text File (.txt). File size should be less than 15 MB. File name should be less than 95 characters.



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