Winona State University Athletic Training Program
Athletic Training Student Application
Preceptor Evaluation

Applicant ___________________________ Date ______________________

Please provide your comments based on your clinical and interpersonal interactions and perceptions of the student. Please use the following scale for your evaluations based upon students with the same level of education and experience:

1 = below average; 2 = average; 3 = above average

I. Clinical Performance
   A. Demonstrates aptitude for the profession: 1 2 3
   B. Demonstrates interest in the profession: 1 2 3
   C. Demonstrates an understanding of what is necessary to succeed in the ATEP/profession 1 2 3
   D. Demonstrates initiative: 1 2 3
   E. Demonstrates dependability: 1 2 3

II. Interpersonal Skills
   A. Verbal communication skills (polite, clear, listens): 1 2 3
   B. Professional presentation (grooming, language, demeanor, maturity): 1 2 3
   C. Ability to work with others (cooperative): 1 2 3

Comments concerning the applicant’s overall performance and ability to succeed in the clinical portion of the Athletic Training Major:

TOTAL POINTS ________/24

Preceptor (Printed): ________________________________ Date: ______________________

Preceptor (Signature): ________________________________

Please return forms directly to:

Brian Zeller, PhD, ATC
Program Director – Athletic Training Program
370 Maxwell Hall

NOTE: This form is provided as an example of the current evaluation that is completed using ATrack.