

Northwood Technical College  
Occupational Therapy Assistant  
Fieldwork Handbook  
**Week Two Review for the Fieldwork Student**  
Fieldwork IIA & IIB

Complete this form by the end of your second week of Fieldwork IIA and Fieldwork IIB. Your Fieldwork Educator(s) must sign the form. Return the completed form to your Northwood Tech Academic Fieldwork Coordinator. The form must be word processed. Upload the completed form onto Blackboard.

**If you answer "no" to any question, please clarify.**

**When your answer is "yes" give a brief description of the activity.**

1. My orientation to the facility prepared me for my Fieldwork Experience. The orientation included facility policies and procedures.

Mark: Yes      No

Give a brief description:

2. I know the assignments and expectations for this Fieldwork Experience.

Mark: Yes      No

Give a brief description:

3. This fieldwork placement correlates with my academic program.

Mark: Yes      No

Give a brief description:

4. I have been provided with adequate feedback regarding my performance.

Mark: Yes      No

Give a brief description:

5. My Fieldwork Educator(s) is providing direct supervision as appropriate for the setting and the severity of the client's conditions.

Mark: Yes      No

Give a brief description:

6. I am aware of who my Fieldwork Educator(s) is and who to contact with any concerns/issues regarding this placement.

Mark: Yes      No

Give a brief description:

Additional Comments:

Student Name(Printed): \_\_\_\_\_

Student Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Supervisor(s) Name (Printed): \_\_\_\_\_

Supervisor(s) Signature: \_\_\_\_\_

Date: \_\_\_\_\_