

Sample Learning Contract

_____ officially has not passed at the 4 week midpoint in this fieldwork experience at _____. In order to continue his/her fieldwork, _____ must meet the following goals within the next two weeks:

(Please formulate measurable goals for the student in areas based on FWPE & site specific objectives)

1. Evaluation - Complete ROM and ADL evaluations according to department protocol.
2. Treatment - establish attainable, behavioral, short term goals specific to assigned patients, in collaboration with the supervisor. Keep track of progress note due dates and provide supervisor with draft of note the day prior to notes being due in the chart.
3. Attitude - Meet established deadlines without reminders. Come to supervision prepared to discuss assigned cases (status plans) and to openly discuss problem behaviors and weak skills.
4. Time Management - Schedule patients, meetings, etc., independently. Use free time constructively to develop skills, complete work and plan for patients, etc.
5. Professional Development -
 - a) Utilize available resources (library, staff, and college resources).
 - b) Follow all department and facility policies and procedures with regard to timeliness

Failure to meet the above goals within the next 2 weeks will result in termination of this fieldwork.

Should _____ meet the above goals within the next 2 week period, he/she will continue in the fieldwork experience for another ___ weeks and remain with the present supervisor. Continuation in this fieldwork experience does not guarantee a final grade of passing.

I understand and I am willing to comply with the above educational goals. I recognize that my fieldwork will be terminated if I do not meet these goals within two weeks. If I meet these goals, I am willing to extend my fieldwork another ___ weeks ending _____. My final status (pass/fail) at the end of this fieldwork is dependent upon my continued growth and ability to meet the minimal criteria for passing.

OTA Student Signature

Date: _____

Fieldwork Supervisor Signature

Date: _____

Academic Fieldwork Coordinator

Date: _____