**Student: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Clinical Faculty: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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

One method to facilitate regular communication with your clinical faculty is through the use of this communication form. Evaluation is based on how thoroughly the questions are addressed, including reflection, self-analysis, and the use of examples.

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| **Communication #1:** |
| 1. **Reflect on the** [**NONPF Domains and Core Competencies of NP Practice**](http://www.nonpf.org/?page=14)**. Give 2 examples of situations or encounters during which you have experienced personal growth and/or challenges.** |
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| 1. **List at least three things that are going well in your clinical experiences.** |
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| 1. **Reflect on your clinical experiences and address your overall satisfaction or concerns with your clinical experiences.** |
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| 1. **Analyze cultural awareness, cultural sensitivity, and cultural competence practice skills that you demonstrated at your clinical practice site.** |
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| 1. **What suggestions can you offer concerning actions that you and/or your faculty member can take to remedy the concerns or problems?** |
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| 1. **On the next page, list the clinical sites and preceptors with whom you have worked and show the respective hours of clinical activities completed during your time with each preceptor.** |

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| --- | --- | --- | --- | --- | --- |
| **Clinical Site** | **Preceptor Name** | | **Clinical Hours** | | |
| **Pedi** | **Women’s Health** | **Family/ Adult** |
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| **Total Hours this Communication Period** | | |  |  |  |
| **TOTAL CLINICAL HOURS THIS SEMESTER** | | |  |  |  |
| **Cumulative Hours with FNP** | |  | **% of Hours with NP** | |  |

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| **Faculty comments:** |
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