

Doctorate in Occupational Therapy Required Evaluation of Volunteer Experience

The Department of Occupational Therapy (OT) will require applicants for the entry-level graduate program to provide evidence of occupational therapy volunteer experience hours. More than one form may be used to document one or more settings. Due to the COVID-19 pandemic the OT program is making exceptions to our current policy for Observation/Volunteer hours for the Fall application cycle. The applicant provides this form as evidence of the following:

- Require only 40 hours of OT relevant experience under the supervision of an OTR (observation/ volunteer)
- Accept observation/volunteer hours within previous 3 years
- Allow observation hours to be conducted in virtual environment
- Observation forms must be completed and signed by the occupational therapist or occupational therapy assistant at each site.

***Submit the form to OTCAS in the Documents Section under Required Documents -“Other”.**

Evaluation of Occupational Therapy Volunteer Experience

Note: Please include hours done within the last 3 years:

Number of hours applicant was supervised by an OTR _____

Number of hours applicant was supervised by other than an OTR _____

Applicant Name: _____

- Population (s) that applicant serves:
- Pediatrics/Youth
 - Adult
 - Geriatrics
 - Psychosocial

Name of Evaluator _____

Position/Title: _____

Name of Facility: _____

Address: _____

City, State, Zip Code: _____

Email: _____

Telephone Number: _____

Attributes

Please rate the applicant on each of the following 8 characteristics. Check the box which best reflects your judgment of the applicant.

		Excellent	Good	Fair	Poor	Not Observed
1.	Attendance and Punctuality-attends as scheduled, arrives on time and stays through session.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.	Respect-respects legitimate authority and works constructively through proper channels to resolve grievances respects.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3.	Responsibility-takes responsibility for his/her own behavior.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.	Teamwork-is able to participate fully as a team member.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5.	Organization-is consistently prepared and able to prioritize.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6.	Response to feedback-can hear and use constructive criticism.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7.	Emotional maturity-handles situations and personal emotions in a professional manner..	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8.	Communications-use effective written and oral communication skills.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Summary Recommendation

- I would highly recommend this applicant.
- I would recommend this applicant.
- I hesitate to recommend this applicant.
- I would not recommend this applicant.
- I do not feel qualified to make a recommendation.

Additional Comments (Include a second sheet if necessary):

Signature of Evaluator _____