

## **EMPLOYMENT EXPERIENCE FORM**

The next two pages are considered and “Employment Experience Form.” This form should be used if the applicant has been a paid employee in a physical therapy clinic. All work experience reported must be documented on the employment experience form provided...other forms of documentation are not acceptable.

The information on this form is considered confidential; therefore the observation and employment evaluation forms must be in a sealed envelope with stamped closure or supervisor’s signature written across the seal. Sealed envelope must be returned to the prospective student to submit with application by April 15th.

- Employment experience hours must be completed within the 9 months prior to the application deadline. Employment experience hours completed before or after this time period will not be accepted.
- All documentation of observation time must arrive at the school by April 15 of the year that you intend to begin the program Documentation of observation time received after this date will not be considered.
- It is the student’s responsibility to make sure the college has received this documentation.

# Employment Experience Form

Physical Therapist Assistant Program

Walters State Community College

For Fall \_\_\_\_\_

**The information on this form is considered confidential.**

Student Name: \_\_\_\_\_

Facility Name: \_\_\_\_\_ Facility Type: \_\_\_\_\_

Facility Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Name and position of the applicant's supervisor: \_\_\_\_\_

Name and position of person completing this form: \_\_\_\_\_

As part of the requirements for application to the Physical Therapist Assistant Program, applicants that cite employment experience in a physical therapy practice must provide documentation of their experience and a reference from their supervising physical therapist or physical therapist assistant. **This form serves as documentation of work experience and may serve as a reference if the person completing the form supervises the applicant's work.** Special comments about the applicant's potential as a physical therapist assistant may be made in the comment section provided on this form. This form should be completed by a physical therapist or a physical therapist assistant that is in a position to be familiar with the quality of the applicant's work during the employment period cited. This employment experience form must be in a sealed envelope with stamped closure or supervisor's signature written across the seal. The sealed envelope must be returned to the prospective student to submit with application by April 15th.

1. The applicant demonstrates appropriate behavior in the practice setting.  
 exceeds expected performance  
 expected performance  
 below expected performance
2. The applicant is punctual and demonstrates dependability.  
 exceeds expected performance  
 expected performance  
 below expected performance
3. The applicant demonstrates the ability to establish rapport with clients and families.  
 exceeds expected performance  
 expected performance  
 below expected performance
4. The applicant demonstrates the ability to establish rapport with coworkers.  
 exceeds expected performance  
 expected performance  
 below expected performance

5. The applicant demonstrates the ability to work effectively as a team member.
  - exceeds expected performance
  - expected performance
  - below expected performance
  
6. The applicant demonstrates self-initiation when appropriate.
  - exceeds expected performance
  - expected performance
  - below expected performance
  
7. The applicant demonstrates recognition of established lines of authority and the ability to follow these lines appropriately.
  - exceeds expected performance
  - expected performance
  - below expected performance
  
8. The applicant demonstrates appropriate verbal and written communication skills.
  - exceeds expected performance
  - expected performance
  - below expected performance
  
9. The applicant demonstrates the ability to learn new tasks in a timely manner.
  - exceeds expected performance
  - expected performance
  - below expected performance
  
10. The applicant assumes an appropriate level of responsibility.
  - exceeds expected performance
  - expected performance
  - below expected performance
  
11. The applicant manages time on the job efficiently.
  - exceeds expected performance
  - expected performance
  - below expected performance
  
12. Based on the applicant's behavior in your practice, please rank the applicant as:
  - exceeds expected performance
  - expected performance
  - below expected performance

Comments:

Beginning and ending dates of Applicant's Employment: \_\_\_\_\_

AVERAGE number of HOURS of employment PER WEEK: \_\_\_\_\_

How long have you worked with the applicant? \_\_\_\_\_

\_\_\_\_\_  
Signature of person completing the form (Required)

\_\_\_\_\_  
Date (Required)