FTO QI Data Tracking Form

DELAWARE TECH
Georgetown ■ Dover ■ Stanton ■ Wilmington

Working FTO: **Date:**

Observing FTO: **Location:**

Student Name: **Phase:**

Observing FTO enter indicated data, circle appropriate responses and enter comments.

Contact # 1. **Age/Sex of Pt:** **Presentation:**

Comments:_____

Prompts: Expectations Position Feedback Prompting Documentation Affect

Student given score of: **Satisfactory** **Unsatisfactory** **Agree / Disagree**

Contact # 2. **Age/Sex of Pt:** **Presentation:**

Comments:_____

Prompts: Expectations Position Feedback Prompting Documentation Affect

Student given score of: **Satisfactory** **Unsatisfactory** **Agree / Disagree**

Contact # 3. **Age/Sex of Pt:** **Presentation:**

Comments:_____

Prompts: Expectations Position Feedback Prompting Documentation Affect

Student given score of: **Satisfactory** **Unsatisfactory** **Agree / Disagree**

Obs. Comments:_____

_____**Initial:**_____

FTO Comments:_____

_____**Initial:**_____