****

**Practice Education Commendations**

**Call for Nominations**

To Final Year Occupational Therapy Students in Queensland

The Occupational Therapy Practice Education Collaborative - Queensland (OTPEC-Q) invites you to nominate suitable Occupational Therapists for Practice Education Commendations for 2016 - 2017. This is your chance to acknowledge and recognise a practice educator who has made a difference to your education, by providing high quality learning experiences during placement experiences from mid-2016 to mid-2017. Recipients will receive a Certificate of Commendation endorsed by OTPEC-Q.

Please complete the attached nomination by explaining in some detail how the Practice Educator fulfilled each of the following criteria ***(Please note the following descriptions are provided to the criteria as seen in practice education. We would like you to describe how the nominee provided high quality learning experiences during your placement):***

*1. Ability to share knowledge and experience in ways that facilitate student learning (e.g. use of appropriate learning strategies, awareness of student learning styles, development opportunities, adequacy of feedback).*

*2. Ability to promote the student’s identity as an occupational therapist (e.g. facilitates knowledge of OT role, facilitates valuing of OT contribution).*

*3. Values and respects student contributions (e.g. accepts student’s professional judgement and perspective).*

*4. Provision of effective supervision and support (e.g. graded supervision as required, timetabled supervision sessions, given responsibility that matches experience level).*

*5. Provision of opportunities for students to engage in reflective practice (e.g. stimulates self-evaluation, encourages independent problem solving).*

Nominations **must** besubmitted electronically as word documents to you’re the person nominated by your University (see the bottom of page 2 for your contact person). A minimum of **two sentences** is required for each ***criterion.*** Please note that all criteria must be addressed with specific details or examples of how your practice educator demonstrated quality practice education.

Incomplete nominations or copied and pasted statements by one student nominee about different practice educators will lead to the nominations being disregarded.

**Practice Education Commendation - Nomination Form 2017**

Nominee: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Workplace: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Nominating Student: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Duration of Placement: *Please circle one of the following*

7 weeks 10 weeks 14 weeks other

Placement Timing: *Please circle one of the following*

Third Year Fourth/Final Year Summer

**Please provide brief examples of how the nominee demonstrates advanced skill regarding each of the criteria below.**

|  |  |
| --- | --- |
| *1. Ability to share knowledge and experience in ways that facilitate student learning (e.g. use of appropriate learning strategies, awareness of student learning styles, development opportunities, adequacy of feedback).* |  |
| *2. Ability to promote the student’s identity as an occupational therapist (e.g. facilitates knowledge of OT role, facilitates valuing of OT contribution).* |  |
| *3. Values and respects student contributions (e.g. accepts student’s professional judgement and perspective).* |  |
| *4. Provision of effective supervision and support (e.g. graded supervision as required, timetabled supervision sessions, given responsibility that matches experience level).* |  |
| *5. Provision of opportunities for students to engage in reflective practice (e.g. stimulates self-evaluation, encourages independent problem solving).* |  |

**Signed: Date:**

***Students please email forms AS A WORD DOCUMENT PLEASE to: otpecq@gmail.com***