Performance Action Plan Form

REMINDER: THIS FORM IS USED ONLY IF IT IS DETERMINED IT IS NEEDED AT THE MID-POINT EVALUATION OR IF NON-COMPETENT BEHAVIOUR IS IDENTIFIED DURING THE PLACEMENT.

ACADIA UNIVERSITY | SCHOOL OF NUTRITION AND DIETETICS

Performance Action Plan

Student Name: Click or tap here to enter text.		Student Number: Click or tap here to enter text.
Organization: Click or tap here to enter text.		Preceptor(s): Click or tap here to enter text.
Placement Type: Choose an item.	Location: Choose an item.	Start Date: Click or tap to enter a date.
Practicum Level: Choose an item.		End Date: Click or tap to enter a date.

If significant concerns about non-competent behaviour and/or the achievement of the performance indicators in the placement are identified during your Mid-Point evaluation by your preceptor(s), please identify three SMART learning goals to help you achieve the key learning outcomes for the placement, and continue your progress toward entry-level proficiency. Identify and list the relevant performance indicators that are related to the learning goal. For each learning goal, think through how you will achieve your learning goals; what supports you will need to be able achieve your learning goals within the remainder of the placement; and how both you and your preceptor(s) will be able to determine if you have met your learning goals.

The completed form must be submitted to Acadia Practicum Supervisor within 48 hours of the mid-point evaluation meeting.

SMART Learning Goal #1:
My SMART learning goal statement:
Identify and list the specific performance indicators that relate to your SMART learning goal.
What supports will you need to achieve your learning goals within the remainder of the placement?
How will you and your preceptor(s) be able to determine if you have met this learning goal?

SMART Learning Goal #2:
My SMART learning goal statement:
Identify and list in the space below the specific performance indicators that relate to your SMART learning goal.
What supports will you need to achieve your learning goals within the remainder of the placement?
How will you and your preceptor(s) be able to determine if you have met this learning goal?

SMART Learning Goal #3:
My SMART learning goal statement:
Identify and list in the space below the specific performance indicators that relate to your SMART learning goal.
What supports will you need to achieve your learning goals within the remainder of the placement?
How will you and your preceptor(s) be able to determine if you have met this learning goal?

Preceptor Name:	Preceptor Signature:	Date:
Practicum Student Name:	Practicum Student Signature:	Date:

The practicum student is responsible for submitting this Performance Action Plan to the Practicum Supervisor within 48 hours of the mid-point evaluation meeting, copied to the preceptor(s), by email.