

## Physician Assistant Shadowing & Patient Contact Hours Form

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**Please return completed form to:**

Program Director, Pre-Professional Physician Assistant Program  
University of the Sciences  
600 South 43rd Street  
Philadelphia, PA 19104

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Last Name First Name Middle Initial

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Student ID

Students applying to the University of the Sciences Graduate Physician Assistant Program must complete, prior to submitting their application through CASPA:

**500 hours of director patient care experience, PLUS 100 hours of shadowing a physician assistant, physician, or nurse practitioner** (a combination of these professionals is preferable). Students should obtain at least 50 hours of shadowing or direct patient contact prior to their first undergraduate year in the program.

This form must be completed and signed by the health care professional who supervised the observation experience. **Keep the original for your records to report to CASPA.** Please give the program director a copy of this form to keep in your folder at USciences.

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Practice or facility

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Address

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City State Zip

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Supervisor's Name/Title Supervisor's Phone Number

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Type of shadowing/patient contact experience

Dates: From: \_\_\_\_\_ To: \_\_\_\_\_ Total number of hours: \_\_\_\_\_

Please evaluate the student from 1 (lowest) to 5 (highest) on the following:

Dress:	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
Promptness:	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
Follows instructions:	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
Attitude and willingness to learn:	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5

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Signature of Supervisor and Date

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Approval of Pre-professional Program Director