



SHO ROTATION PROGRAMMES 2012

CANDIDATE APPRAISAL FORM – PAEDIATRICS

Name of candidate:		Date of Birth:	
This person worked under my supervision from:		To:	
Specialty:	Hospital:		
Country:	Grade (e.g. Intern, SHO):		

It is expected that most candidates will score 3 marks. Only exceptional candidates should score 4 or 5

1=poor 2=inadequate 3=satisfactory 4=above average 5=excellent

Professional Attitude	Please tick one number per line				
Professionalism	1	2	3	4	5
Skill in diagnosis	1	2	3	4	5
Attitude to patients	1	2	3	4	5
Attitude to nursing staff	1	2	3	4	5
Diligence in record taking	1	2	3	4	5
Emergency management	1	2	3	4	5
Punctuality	1	2	3	4	5

Personal Attributes	Please tick one number per line				
Integrity	1	2	3	4	5
Intelligence	1	2	3	4	5
Initiative	1	2	3	4	5
Common sense	1	2	3	4	5
Professional appearance / presentation	1	2	3	4	5
Communication skills	1	2	3	4	5
Attendance & performance at conferences	1	2	3	4	5

Did this doctor perform well in this post? Very well Acceptable Not Acceptable

Do you think this doctor is suitable for a career in Paediatrics? Yes Unsure No

Has this doctor any outstanding characteristics? _____

Comments _____

Your Full Name _____

Job Title _____

Signed _____ Date _____

This form will not be accepted
without a Hospital Stamp

Candidates are required to obtain completed Candidate Appraisal Forms from two supervising consultants. A copy of both appraisal forms should be brought to each interview. **Please note that for the purposes of employment, and in accordance with the Data Protection Acts 1988 and 2003, this form will be made available to the training site upon successful allocation.**