





Non-Discrimination Policy

Technical Standards and Students with Disabilities

Essential Performance Standards for Success in the School of Physical Therapy

Essential Performance Standards

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Practice Expectations

Professional Ethics, Values and Responsibilities

*Code of Ethics.
Core Values.*

Patient/Client Management Screening

Examination, Evaluation and Diagnosis

Participation in Health Care Environment

Course Schedule

Role of the CI

Initial Student Contact with Facility

Determination of Student Readiness for Clinical Education Experiences

Attendance

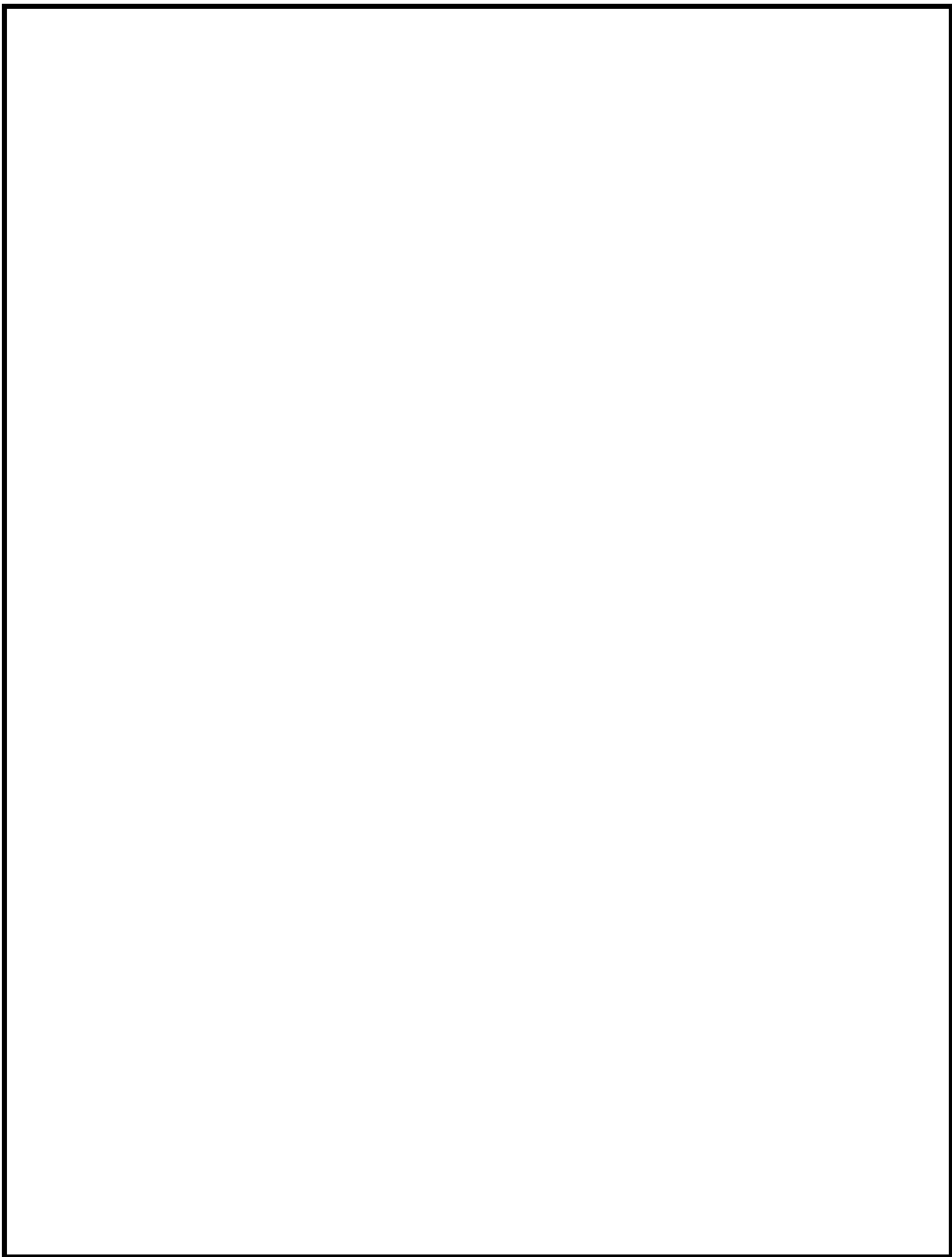
Attendance, Promptness, Disruption of Clinic

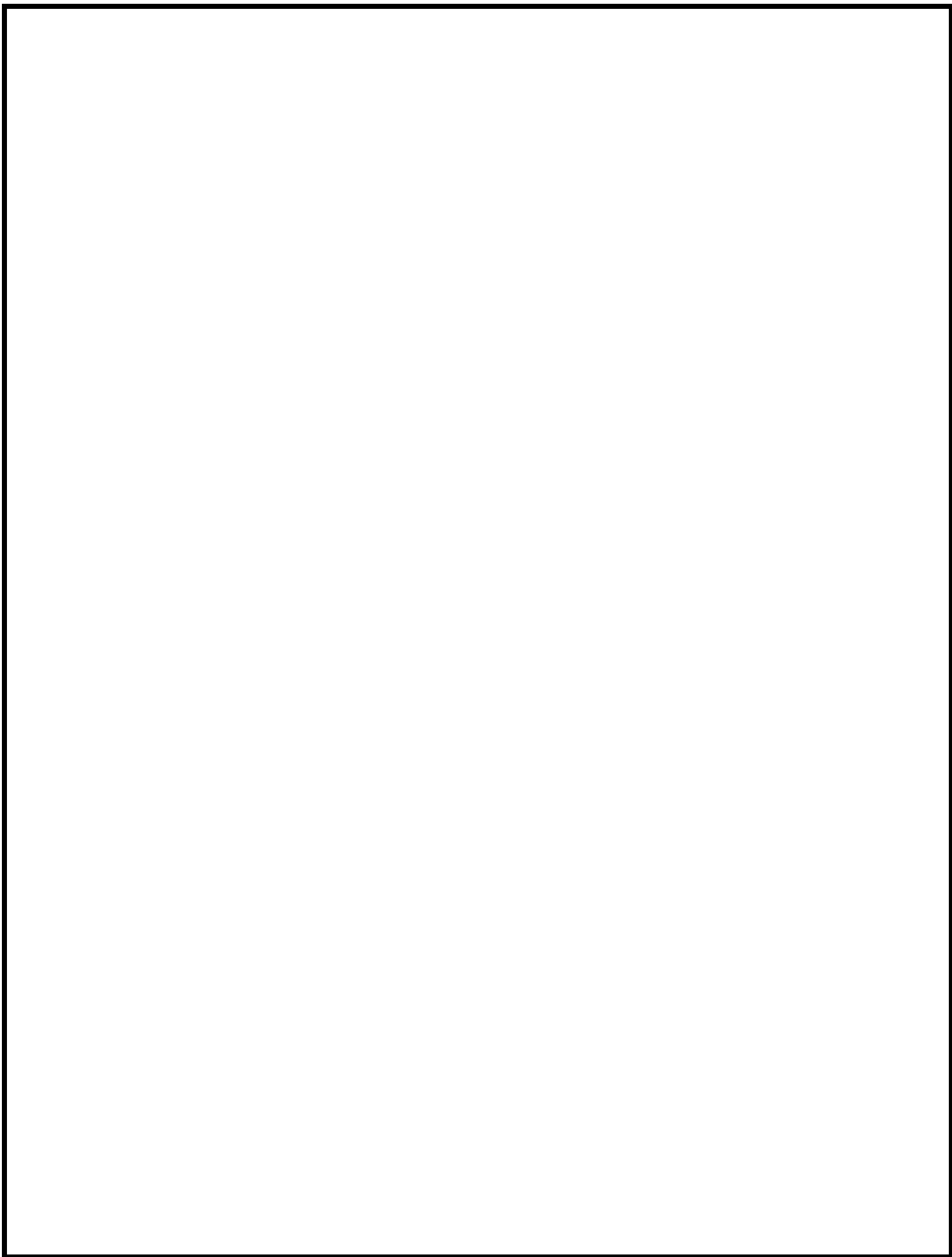
Student Mistreatment

Privacy Rights of Student

Effectiveness of a Clinical Instructor

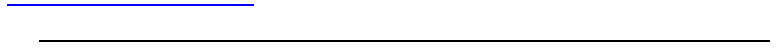
Reporting to SCCE/DCE





APTA Assessments

Current SCCEs/CIs



New SCCEs/CIs



Assessments

The reader should take notice that while every effort is made to ensure the accuracy of the information provided herein, this institution reserves the right to make changes at any time without prior notice. The institution provides the information herein solely for the convenience of the reader and, to the extent permissible by law, expressly disclaims any liability, which may otherwise be incurred.

1.5. Student Compliance. School will instruct students to abide by the poli

5. **FERPA Re-Disclosure**

Both parties recognize that they are bound to comply with the Family Educational Rights and Privacy Act (FERPA) in their handling of education records of any students which may be

9. Notices.

When required by the terms of this Agreement, the parties shall give notice by personal delivery or by Certified Mail, return receipt requested, postage prepaid, and addressed as indicated below:

To School: George Fox University
414 N. Meridian, Box 6029
Newberg, OR 97312
Attn: Jeremy Hilliard

To Facility:

Attn:

IN WITNESS WHEREOF, the parties have signed this Agreement on the date written above.

GEORGE FOX UNIVERSITY

By: _____

Its: _____

Date: _____

By: _____

Its: _____

Date: _____