## TU TUWSON UNIVERSITY.

DEPARTMENT OF OCCUPATIONAL THERAPY & OCCUPATIONAL SCIENCE

## LEVEL II ELECTRONIC FIELDWORK DOCUMENTATION INSTRUCTIONS TO SAVE, COMPLETE, SIGN, AND SUBMIT



I document to your computer. This document was included in the TU OT LII FW Packet the site coordinator received via email. If there is more than one Fieldwork Educator (FWEd), one person should be responsible for keeping the official copy.

Save the 'TU OT FWPE.pdf'

2 Open the FWPE PDF using Acrobat DC.

The document will work in Adobe Acrobat Reader DC (free version) and Adobe Acrobat DC (paid version).

If Adobe Acrobat is not your default PDF reader:

- a. Open the folder that the FWPE is saved in. If it is saved on your desktop, just view your desktop.
- b. Right click the file
- c. Hover your mouse over Open with
- d. Select Adobe Acrobat DC or Adobe Acrobat Reader DC from the list

Juse "File" > "Save As..." to save a new copy of the document using the following naming mechanism: studentname\_ss18fwpe.pdf

<u>At week 6</u>, complete the first page and scoring for the student's mid-term performance and save the document. Please submit the mid-term score using the separate document provided by the TU Faculty Supervisor.

<u>At week 12</u>, complete the final scoring for the student's performance and follow the remaining steps.

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	FIELDWORK SETTING:	NUMBER OF PERSONS CONTRIBUTING TO THIS REPORT		
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			Store and share files in the Document Cloud Learn More	

Sign with a Digital ID

Choose the Digital ID that you want to use for signing:

Fieldwork Educator (Digital ID file)

Issued by: Fieldwork Educator, Expires: 2023.08.03

After completing and reviewing the final fieldwork performance evaluation (FWPE) with the student, complete these steps to sign and return the FWPE and other required end-of-placement documentation.

Type your name in the "Print Name/Credentials/ Position" line.

Click on the "Signature of Rater #1" line.

6 A - If you already have an existing Digital ID, select the ID you want to use, click "Continue", and skip to step 13.

×

Refresh

View Details

6 B - If you need to create a new Digital ID, select "Configure Digital ID" or "Configure New Digital ID", depending on which popup you see.

(?)	Configure New Digital ID Cancel Continue		
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Would you like to configure one now?			
Help	Configure Digital ID Cancel		

Configure a Digital ID	for signing		× Zelect "Create a new Digital ID", then click
A Digital ID is required to	Select the type of D	igital ID:	"Continue."
create a digital signature.The most secure Digital ID are issued by trusted Certificate authorities and are based on secure devices like smart	Con com	a Signature Creation Device figure a smart card or token connected to your puter	
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Digital IDs are typically issued by trusted providers that assure the validity of the identity. Self-signed Digital ID may not provide the same level of assurance and may not be accepted in some use cases. Consult with your recipients if this is an acceptable form of authentication.	Sav     Sav     Sav     Sav     Sav     be :	re to File e the Digital ID to a file in your computer re to Windows Certificate Store e the Digital ID to Windows Certificate Store to shared with other applications	
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valid. For this reason they may not be accepted in some use cases	Country/Region	US - UNITED STATES	
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	Use Digital ID for	Digital Signatures	
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<b>10</b> Create a password you will remember.
The Digital ID should automatically be saved in your Acrobat AppData folder. You should not need to change this unless you would like it saved somewhere else.
12 Select the Digital ID you just created, then click "Continue".
13 Review the Sign as dialogue box for
accuracy. $\Box / A - If ready to sign$
14 enter your signature in the text box and click "Sign." A "Save as" dialogue box will pop up. 14 B - If you need to change something, click "Back." Make any changes necessary, then continue forward as in 14A.

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15 Click "Save" to apply the signature and save the file. The file name should remain the same.

If you receive a pop-up that says there is already a file with that name, select "Yes" to override.

16 Repeat steps 4 through 15 for each additional signature, including the student's.

17 If more than two Fieldwork Educators need to sign the form, please use the FWPE Supplemental Signature Form provided in our <u>Fieldwork Training Resources</u>

18 Use this same process to have the student and at least one supervisor sign the Student Evaluation of the Fieldwork Experience (SEFWE) and the Release of Information Form, both of which should be sent to you by the student prior to or during your final meeting.

## RETURN FINAL FORMS IN A SINGLE EMAIL TO THE TU OT ACADEMIC FIELDWORK COORDINATOR

Create a new email and attach all end-of-placement documents:

a. FWPE completely filled out and with the signatures of all Fieldwork Educators and the student

b. SEFWE completely filled out and with the signatures of one Fieldwork Educator and the student

c. Release of Information Form completed and signed by one Fieldwork Educator and the student

d. If used, the FWPE Supplemental Signature Form

e. If not previously returned, the Confirmation of Fieldwork Educator's Qualifications form

Copy all individuals who signed forms on the email (i.e. the student and any additional FWEds)

Send the email with all attachments and everyone copied to otafwc@towson.edu

		Towson University
OTUDENT EVALUATION OF THE FIELDWORK EVERNENCE (OFFICE)	TOWSON UNIVERSITY.	Department of Occupational Therapy & Occupational Science
STUDENT EVALUATION OF THE FIELDWORK EXPERIENCE (SEFWE)	Department of Occupational Therapy & Occupational Science Release of Information Form	Confirmation of Fieldwork Educator's Professional Qualifications
PURPOSE This evaluation serves as a tool for fieldwork sites academic programs and students. The main objectives of		
this estimation are to: • Earth for Level II followed structures in number programs, non-number, is an immune representer to • Earth for Level II followed structures in a followed setting for the context of the followed setting information to benefit from indext feelbock in order to develop and refine their Level II followed programs: • Provide Systemic information to industing this are selecting usits for finance Level II fieldwork in the selecting setting and the selecting interface of finance Level II fieldwork • Provide Systemic information to industing this are selecting usits for finance Level II fieldwork • Provide Systemic information to industing this are selecting usits for finance Level II fieldwork • Provide Systemic informations to industing this are selecting usits for finance Level II fieldwork • Provide Systemic information on the selecting usits for finance Level II fieldwork • Provide Systemic informations of the selecting usits for finance Level II fieldwork • Provide Systemic information of the selecting usits for finance Level II fieldwork • Provide Systemic information (Provide Systemic II) fieldwork information (Provide Systemic II) • Provide Systemic II fieldwork in the selecting usits for finance Level II fieldwork in the selecting usits for the selecting usits and the selecting usits and the selecting usits for the selecting usits and the selecting usits an	The student named herein is scheduled to complete twelve (12) week/480 hours of clinical education with the facility name below. Said student hereby gives permission to the facility and the university to release information from the Fieldwork Evaluation as part of an employment reference.	In order to comply with accretations tatemarks of the Accretations Council for Occupational Therapy Bocstation (ACOT), the objectment multi very that dee of fingtown descore in qualities to supervise Level II students biological to the lateral of the Received experience. Prese exists us by completing this form and returning it is soon as possible.
This form is designed to offer each program the opportunity to gather meaningful and useful information. Programs may adapt this form to suit their needs.	Facility Tourson University	I, Fieldwork Site Coordinator (PRINT)
	University	confirm that
STUDENT INSTRUCTIONS 1. Complete do SETWE before your final maeting with your fieldwork educator()). 2. Email the completest form to your fieldwork educator prior to reviewing your final fieldwork performance exhaustion (FWPE).	Student (Printed)	Plaiswork Educator Name, License R, and License Expiration Date
<ol><li>Review and sign the SEFWE with your fieldwork educator at the same time that you review and sign</li></ol>	Student Country	
your FWPE.	Stodent Signature Date	Fieldwork Educator Email
FIELDWORK EDUCATOR (FWE4) INSTRUCTIONS 1. To preserve objectivity in completing the Faileheet Performance Evaluation (FWFE), we strongly recommend that Folderwic Educators do not review the SEFWE until here have consider all scorate in the student FWFE? 2. Instrument and the structure of the structure of the SEFWE 2. Using the instructions in the plenement packet email you received from UL, return both on FWFE and 3. Using the instructions in the plenement packet email you received from UL, return both on FWFE and 3. Using the instructions in the plenement packet email you received from UL, return both one FWFE and 3. Using the instructions in the plenement packet email you received from UL return both one FWFE and 3. Using the instructions in the plenement packet email you received from UL return both one FWFE and 3. Using the instructions in the plenement packet email you received from the FWFE and 3. Using the the formation of the plenement packet email you received from the FWFE and the FWFE and 3. Using the the formation of the plenement packet email you received from the FWFE and the formation of the formation of the plenement packet email you received from the FWFE and the planet packet email the planet p	Academic Fieldwork Coordinator (Printed)	has a minimum of one year of practice superience subsequents in initial conflictation. It currently instead, and is adequately properties to are set as defound aductant. The failework sites outsides of the United States, the accupational Therapilits and has at least 1 year of experience in practice.
SEFWE promptly upon completion of the placement.		Siaktwork Site Coordinator Simature Date
	Fieldwork Educator Signature Date	Treamon and contained any react
	In accordance with the Family Educational Hights and Privacy Act of 19/4, information about the <b>student</b> 's clinical education cannot be given to potential employers unless this form is signed by the <b>student</b> , ensuring confidentiality of student records. A copy	Email
	of this form must bear all appropriate signatures to be valid. A copy of the form must be retained by the <b>facility</b> and by the <b>university</b> .	Facility
	The student will complete the form at the request of the Academic Fieldwork	Addrawn
	provide a copy of the form to the facility after all signatures are present. The student retains the right to submit, in writing, a formal request to recind their permission to	A set to a
This form has been adapted by the Department of Occupational Therapy & Occupational Science at Towson University	the facility and the university to release information from the Fieldwork Evaluation as part of an employment reference.	City, State, Zip
AOTA SEFWE Task Force, 2016	Provide Array and Arr	Last Updated: 5-19-17
1	Revised May 2018	
SEFWE (11 PAGE PDF)	Release of Information Form	Confirmation of FWEd's

CONFIRMATION OF FWED'S QUALIFICATIONS FORM