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| **ENGLISH MEDICINE**  **PROGRAM**  **20.. / 20..**  **ACADEMIC YEAR**  **PROFESSIONAL (VOCATIONAL)**  **SKILLS LABORATORY**  **COURSE**  **PROGRAM**  **EVALUATION**  **and**  **DEVELOPMENT**  **REPORT**  **Prepared by:**  **Professional (Vocational) Skills Commission** |

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| **MSKU**  **MEDICAL SCHOOL**  **TURKISH**  **MEDICINE PROGRAM**  **20.. / 20..**  **ACADEMIC YEAR**  **PROFESSIONAL (VOCATIONAL) SKILLS LABORATORY COURSE**  **PROGRAM EVALUATION AND DEVELOPMENT REPORT \*,\*\*** | |
| **Chairman of the Vocational Skills Committee** |  |
| **Vocational Skills Commission Term Officers** |  |
| **Professional Skills Committee Members and Task distribution** | **1.**  **2.**  **3.**  **4.**  **..** |
| **Phase and Committees and Code of Vocational Skills Laboratory Course-ECTS** | **Course Code: Phase: Committee: ECTS:**  **Course Code: Phase: Committee: ECTS:**  **Course Code: Phase: Committee: ECTS:** |
| **Vocational Skills Laboratory Course Skill-Application Names and Names of Instructors** | **Phase 1**  **1. Skill: Instructor:**  **2.**  **3**  **Phase 2**  **1.**  **2.**  **3.**  **Phase 3**  **1.**  **2.**  **3** |
| **Total Skill-Practice / Instructor / Total Number of Students** | **Phase 1:**  **Lecture hour: Number of Instructors: Number of Students:**  **Phase 2:**  **Lecture hour: Number of Instructors: Number of Students:**  **Phase 3:**  **Lecture hour: Number of Instructors: Number of Students:** |
| **How Does the Vocational Skills Laboratory Affect the Committee/Phase Grade Point?** | **Phase 1:**  **Phase 2:**  **Phase 3:** |
| **Comments on Comparative Student Exam Success** | **1.**  **2.**  **..** |
| **Student Feedback (Survey)** | **Positive Feedbacks:**  **1.**  **2.**  **..** |
| **Topics to be Developed:**  **1.**  **2.**  **..** |
| **Student Feedback (Face to Face-Online-Open Ended-Interview with the Dean-Coordinator Hour/ Vocational Skills Laboratory Evaluation Hours)** | **Positive Feedbacks:**  **1.**  **2.**  **..** |
| **Topics to be Developed:**  **1.**  **2.**  **..** |
| **Instructors Feedback** | **1.**  **2.**  **..** |
| **Recommendations for Program Evaluation and Development:** | **Program Evaluation:**  **1.**  **2.**  **..**  **Recommendations for Program Development:**  **1.**  **2.**  **..** |

**Vocational Skills Committee Chairman/Vice Chairman Name and Signature:**

**\*The report will be used by the Chief Coordinator for Program Evaluation and Development. Please send a copy of the report to the Chief Coordinator by e-mail.**

**\*\*Please leave a copy of the signed version of the report to student affairs for archiving.**