Emory University
Professional Conduct Evaluation
Cover Sheet

Please complete this professional conduct evaluation form about that student and return it via email to Mary Kaye Garcia, Registrar, (marykaye.garcia@emory.edu). Ms. Garcia will forward the completed form to the appropriate Dean(s) for review and follow-up. Your comments will be discussed with the Progress and Promotions Committee as part of our review of our student’s professionalism. You may receive a call from a Dean or a member of the Progress and Promotions Committee to obtain further details about your concerns.
Professional Conduct Evaluation

Date:  
Student Name:  
Course/Clerkship:  
Course/Clerkship Director Name: 

The above-named student has exhibited one or more of the following attitudes and/or behaviors and requires further education and/or assistance to meet expected standards of professional conduct. The following areas of concern may help you formulate the narrative requested below.

1. Work Ethic and Responsibility to Team: Attendance, Reliability, Level of Commitment, Preparedness
2. Professional Maturity, Response to Feedback, Self-Improvement, Flexibility/Adapting to new situations, Recognizing limitations and seeking help
3. Respects Patient Confidentiality
4. Duty to Care
5. Ethical Standards: Honesty, Integrity, Responsibility, Behaviors or Attitudes
6. Other areas of Professionalism: Contribution to learning atmosphere, Respect for diversity (i.e. race, gender, religion, culture, sexual orientation, age, disability, or socio-economic status), Conflict resolution, Language/communication, Attire, Records management

Please describe your concern(s) in detail

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Date(s) of meeting with the student to discuss this issue: _____________________________________________

Student was given an opportunity to provide an optional statement for P&P Committee consideration: 
Yes _______ No _______

If you attempted to contact the student to address this issue and did not receive a response, please provide the date(s) and method of contact: ______________________________________________________
Student comments regarding the contents of this report (optional). These comments will be attached to the report that will be reviewed by the Progress and Promotions Committee.