



**Lane Community College
Physical Therapist Assistant Program
Student Profile**

Student Name:	Course & Dates: <input type="checkbox"/> PTA 280A Date:
Mailing Address:	<input type="checkbox"/> PTA 280B Date:
City, State & Zip:	<input type="checkbox"/> PTA 280C Date:
Preferred Phone:	Clinical Site:
Alternate Phone:	Emergency Contact Person:
E-mail:	Emergency Contact Phone:

Give a brief statement about why you chose to pursue a career as a Physical Therapist Assistant.

Please describe previous education, observation, and work experience in the healthcare field. Include setting, job responsibilities, and length of experience.

What are your personal strengths and weaknesses?

What clinical skills and activities are you most comfortable performing in this setting?

What clinical skills and activities would you like to learn more about or get more practice performing in this setting?

What are your personal goals for this clinical experience?

Which statement best describes your learning style?

Visual - learning by watching or reading

Auditory - learn by listening or hearing

Verbal - learn by talking and discussing

Kinesthetic - learn by doing

Is there any other information you would like to share with your Clinical Instructor related to this clinical experience?