

# DOCUMENTATION OF PHYSICAL THERAPY OBSERVATION



Print a separate form for each facility

**Applicant:** \_\_\_\_\_

**Facility Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Facility Address:** \_\_\_\_\_

**City, State, Zip Code** \_\_\_\_\_

**City, State, Zip Code** \_\_\_\_\_

**Applying for Semester Beginning:**     /     /

**Phone:** \_\_\_\_\_

Candidates for the Physical Therapist Assistant program may complete hours of observation/volunteer experience under the supervision of a licensed Physical Therapist or Physical Therapist Assistant within one year of the application deadline. Applicants are not required to complete Physical Therapy observation. It is the applicant's responsibility to be sure that this form is complete, accurate and submitted with the SOLEX College Physical Therapist Assistant Application by the program's application deadline. Different forms will not be accepted; this form may be reproduced as necessary. Please print legibly.

**Experience: Circle one of the following experiences / settings**

Out-patient	Acute Care	Sports PT	Industrial PT	Pediatrics
Extended Care / Nursing Facility	Home Health	Rehabilitation Hospital	School-based PT	

	DATE	STARTING TIME HR MIN AM / PM	ENDING TIME HR MIN AM / PM	# OF HOURS
1	/ /	:	:	
2	/ /	:	:	
3	/ /	:	:	
4	/ /	:	:	
5	/ /	:	:	
6	/ /	:	:	
7	/ /	:	:	
8	/ /	:	:	
9	/ /	:	:	
10	/ /	:	:	
11	/ /	:	:	
12	/ /	:	:	
13	/ /	:	:	
14	/ /	:	:	
15	/ /	:	:	

**TOTAL DAYS**

**TOTAL HOURS**

I certify that the hours listed above were performed by me. I understand that the SOLEX Admissions Committee may verify this document for authenticity and realize that falsification of this document will result in my application to PTA Program being withdrawn from consideration.

\_\_\_\_\_  
**Student Signature**
**Date**

I certify that the hours listed above were spent under my supervision of one of my licensed coworkers and involve the observation of direct patient care.

\_\_\_\_\_  
**Name (please print)**
**Supervising Therapist Signature**
**Date**

\_\_\_\_\_  
**Position**
**E-mail**