

**Mercer County Community College
 Physical Therapist Assistant Program
 1200 Old Trenton Road
 West Windsor, NJ 08550
 Phone 609-570-3478**

**Clinical Education
 Attendance Verification Form**

**Clin Ed II (PTA 235)
 200 Hours Required**

Learner Name: _____

Clinical Instructor Name: _____

Sun	Mon	Tues	Wed	Thurs	Fri	Sat	Total Hours	Student Initials	CI Initials
Example	9-5 (8)	9-1 (4)	9-7 (10)	9-7 (10)	9-5 (8)		(40)	PTAS	CI
31	1	2	3	4	5	6			
7	8	9	10	11	12	13			
14	15	16	17	18	19	20			
21	22	23	24	25	26	27			
28	29	30	1	2	3	4			

When the affiliation is complete, please sign below:

Learner Signature: _____

Date: _____ **Total Hours:** _____

CI Signature, Title, Lic #: _____

Date: _____