



Dear Occupational Therapy Assistant Student:

**A requirement to be completed prior to starting the technical/clinical courses of the Occupational Therapy Assistant program is a job shadow, for 4 hours in a facility of your choice that employs OTs and OTAs. Attached is the form to be completed by the designated person at the job shadow experience.**

**Please do the following:**

- **OT Observation:**

Select a facility convenient to you that employs an OT/OTA. Call to request observation time.

Answer the two questions in the job shadow form, and have the OT/OTA practitioner complete the form and sign-off accordingly.

You will be required to upload the job shadow form, after you are selected through the petition process. It is highly recommended that you keep the original in your personal files.

If you have any questions or concerns regarding the job-shadow, please contact the School of Health Sciences at 414-297-6263. We look forward to helping you meet your educational goals.

Sincerely,

School of Health Sciences

1/22/2014

Occupational Therapy Assistant Program

**Job Shadow Form**

**Student Instructions:**

Obtain the required signature at your chosen site. You will be required to upload this form, after you are selected through the petition process to begin the Occupational Therapy Assistant program.

Please answer the following questions about your observation:

1. What did you learn about the job of an OTA or OT that you didn't already know?
  
  
  
  
  
  
  
  
  
  
2. How did your observations influence your decision to become an Occupational Therapy Assistant?

**Site Supervisor Instructions:**

Please complete the following information and sign below, then give to give to the student.

\_\_\_\_\_ has shadowed 4-hours at \_\_\_\_\_  
(Student name – please print) (Facility Name)

**List the full address for the facility:**

\_\_\_\_\_  
Signature of OT/OTA Practitioner

\_\_\_\_\_  
Date