

**MORAINE PARK TECHNICAL COLLEGE
PORTFOLIO WORKSHEET/VERIFICATION CHECKLIST
2007-2008**

Program Name: Nursing - Associate Degree
Program Number: 10-543-1
Required DML: Clinical Evaluations

Student Name:
MPTC Six-Digit Student ID #:
Semester of Program Acceptance:

* * * At least one artifact is required for each learning outcome * * *

Directions: In columns A and B, student enters dates when items are completed or checks
 Column C if transcript is used for advanced standing credits. Verifier initials column D when portfolio is
 verified for graduation requirement. Submit a signed copy (see last page) of this form with a copy of your
 portfolio for verification. Note: Keep original portfolio; submit a copy.

Contact Course Instructor If No Artifact Is Listed In This Column	A	B	C	D
Suggested Work Sample from Performance Asmt	Reflection Statement	Work Sample Linked to Outcome	Transcript Used	Verified

Your Student Portfolio will be evaluated by educators and advisory committee members and becomes the property of Moraine Park Technical College.
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Program Learning Outcomes				
Associate Degree Nursing (after completing all four semesters)				
Adhere to professional standards of practice within legal, ethical and regulatory frameworks of the registered nurse.				
Use effective communication skills.				
Assess health of individuals, families and groups within the context of the community.				
Make clinical decisions to assure safe and accurate nursing care.				
Provide caring interventions with diverse populations.				
Use teaching and learning processes to promote and restore health.				
Collaborate with others to respond to the needs of individuals, families and groups across the health-illness continuum.				
Manage care to facilitate continuity within and across health care settings.				
Core Abilities				
890-125 Student Success AND 890-130 Career Development	Core Ability Inventory			
	Core Ability Inventory and Self-assessment Reflection			
	AND Reflection essay "How I've Changed: Then and Now"			

Continued next page

LEARNER:

I understand that this portfolio will be evaluated by educators and advisory committees and becomes the property of Moraine Park Technical College.

The contents of this portfolio
_____ **MAY** **MAY NOT** _____
be displayed to other students and the general public.

Signature of Learner

Date

VERIFIER:

After verification is complete, forward portfolio to the
Outcome Assessment Office.

Signature of Verifier

Date