

PHYSICAL THERAPIST ASSISTANT PROGRAM

Please notify the PTA Program Director, Dr. Sharon Dunnivan-Mitchell, at (361)698-1848 or sdunnivanmitchell@delmar.edu, to report any concerns regarding professional behavior by the applicant during observation (per Del Mar College Student Handbook, delmar.edu/catalog).

OBSERVATION/VOLUNTEER CONTACT HOURS LOG SHEET

Date	Name of Company/ Location	Name and Signature of Licensed PT or PTA (will verify license at ptot.texas.gov)	Types of Patients Observed	Number of Contact Hours

Student's Name: _____

Total Hours: _____

Date: _____

The Observation log can *only be signed by a licensed PT or PTA* (license will be verified at ptot.texas.gov) and is an admission requirement for applicants wanting to enter into the PTA program. Although an applicant is NOT a PTA student and may or may not be a Del Mar College student, since the applicant is seeking entrance into the PTA program *the applicant must comply by Del Mar College policy in regards to behavior*. Inappropriate behavior, per Del Mar College policy, can be found at delmar.edu/catalog.