

Athletic Training Student Weekly Learning Log
Southeastern Louisiana University
Athletic Training Education Program

Please fill out this weekly log and turn it in to your Field Experience Educator at the end of the month. Feel free to write any extra comments on the back of this form.

Student Signature: _____

W Number: _____

Guided Questions:

1. What were your responsibilities for the week?
2. What were your learning experiences for the week?
3. Which clinical instructors provided the learning experience week?

Date	Responsibilities	Learning Experience	Clinical Instructor Providing Weekly Experience	Review of Weekly Journal From C.I. (Signature of C.I.)

