

School of Health Sciences Physiotherapy
Learning Contract

**UNIVERSITY OF
BIRMINGHAM**

LEARNING NEEDS ANALYSIS (*to be completed before drawing up the learning contract overleaf*)

	Known to student	Not known to student
Known to clinical educator		
Not known to clinical educator		

OUTCOME RECORD (To be completed at the end of the contract period)

- In the space below comment on the extent to which **planned learning outcomes** have been achieved.
- In addition, identity any **unplanned outcomes**.

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Negotiated Between 1.(Student) 2.....(Facilitator)
Practice Location: Duration of Contract: From: to:

Date	Planned learning outcomes	Strategies and resources	Criteria and means of evaluation	Date achieved
	<i>Module learning outcomes:</i>			
	<i>Placement specific learning outcomes:</i>			

Instructions to students:

1. Complete the learning needs analysis overleaf **before** drawing up the details of the contract.
2. At the end of the contract period complete the OUTCOME RECORD overleaf.

Signed 1:.....

2:.....

Date:.....