**VALENCIAlogo_(300**

**Advanced Practice Reflection Report**

|  |  |
| --- | --- |
| **Candidate’s Name** |  |
| **Dean’s or Director’s Name** |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Candidate’s Advanced pRACTICE Reflection | |  | | |
|  |  | One | | comments / Recommendations for Improvement |
| Candidate’s Advanced Practice Discussed | Discusses specific advancements that were achieved within his or her practice. | YES | NO |  |
| Candidate’s Growth and Contributions Discussed | Offers reflection of growth and contributions. | YES | NO |  |
| Candidate’s Benefits to Self Discussed | Describes specific personal and professional benefits to self. | YES | NO |  |
| Candidate’s Benefits to Students, the College, the Discipline, or the Community Discussed | Describes specific benefits to students, the discipline, the college, or the community. | YES | NO |  |
| Candidate’s Relevant Artifacts Included | Provides documentation and/or artifacts as evidence of Advanced Practice (if applicable). | YES | NO  N/A |  |