

Psychiatry Clerkship Unprofessional Behavior Form

If any individual (i.e, students, SIU employees, hospital staff, etc) does not exhibit the following behaviors, please complete this form.

1. Commitment to professional responsibilities
2. Adherence to ethical principles
3. Sensitivity of a diverse patient population
4. Respects the roles of others when working and/or learning

Please describe the individual's behavior.

Was the problem discussed with the individual? Yes No

If the problem was discussed with the individual, please comment on his/her reaction.

Optional Signature: _____

Date: _____