

NATIONAL POSTGRADUATE MEDICAL COLLEGE OF NIGERIA



POSTGRADUATE DIPLOMA LOGBOOK FOR
EPIDEMIOLOGY AND BIostatISTICS

FACULTY OF PUBLIC HEALTH AND COMMUNITY
MEDICINE

APPROVED BY THE SENATE ON 1ST DECEMBER, 2022

A handwritten signature in blue ink, appearing to read 'F. A. Arogundade', is positioned above the name of the Registrar.

DR F. A. AROGUNDADE, MD FMCP
COLLEGE REGISTRAR



**FACULTY OF PUBLIC HEALTH AND COMMUNITY MEDICINE
NATIONAL POSTGRADUATE MEDICAL COLLEGE OF NIGERIA
(NPMCN)**

FIELD INTERNSHIP LOGBOOK
FOR POSTGRADUATE DIPLOMA

IN

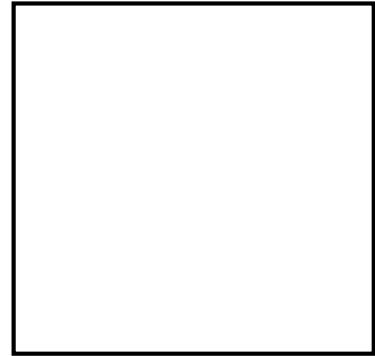
EPIDEMIOLOGY AND BIostatISTICS

2022

TABLE OF CONTENTS

	Page
<i>Student Information</i>	3
<i>How to use the internship logbook</i>	4
<i>Code of conduct for students</i>	4
<i>Organization's profile</i>	5
<i>History and structure of the organization with organogram attached</i>	6
<i>Daily Record of Activities</i>	6
<i>Monthly evaluation of student internship experience</i>	10
<i>Assessment of Candidate</i>	16

STUDENT INFORMATION



TRAINEE'S PASSPORT PHOTO

NAME:

SEX:

.....

SESSION:

MATRICULATION NO:

COURSE OF STUDENT:

TELEPHONE:

.....

E-MAIL ADDRESS:

HOW TO USE THE INTERNSHIP LOGBOOK

This book is to assist the student to keep accurate records of the internship activities and the Departments, Units, or Organisations where the internship was undertaken for the student's performance assessment.

1. Students must complete the information on the profile of the department, unit, or organization where the internship was undertaken
2. The student must record the activities completed daily.
3. The student should present the Logbook to the Supervising officers at the Internship site at the end of each activity for signing with date.
4. The student should present the Logbook to the Supervisor to counter sign with date and assess the student's performance and progress
5. The student should present the Logbook to the Faculty of Public Health and Community Medicine for assessment during the final examination for the award of degree in postgraduate diploma in Epidemiology and Biostatistics

CODE OF CONDUCT FOR STUDENTS

1. Report on time at the place of Internship with the letter of Introduction.
2. Be punctual to all activities, and work until the official closing time at the Internship site.
3. Take instructions from the designated supervisor in charge of your internship at the site.
4. Observe the rules and regulations of the organization, departments, or units to which you are attached.
5. Be a good team member.

ORGANIZATIONS PROFILE

NAME OF ESTABLISHMENT

LOCATION

STATE

YEAR OPERATION STARTED/COMMENCEMENT OF WORK

RELEVANT AREAS OF OPERATION AND ACTIVITIES:

Areas	Activities	Period student spent
1.		
2.		
3.		
4.		
5.		
6.		
7.		

HISTORY AND STRUCTURE OF ORGANIZATION (ATTACH ORGANOGRAM)

DAILY RECORD OF ACTIVITIES

WEEK.....

DAY	NATURE OF ACTIVITIES	Student's Role	Supervising officer's Name, sign, date
MON			
TUES			
WED			
THUR			
FRI			

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TUES			
WED			
THUR			
FRI			

**MONTHLY EVALUATION OF STUDENT INTERNSHIP EXPERIENCE
PERFORMANCE RATING (To be completed by the supervisor.)**

NATIONAL POSTGRADUATE MEDICAL COLLEGE, FACULTY OF PUBLIC HEALTH AND COMMUNITY MEDICINE
DIPLOMA IN EPIDEMIOLOGY AND BIostatISTICS

Criteria	Outstanding	Very Good	Satisfactory	Below average
1. Regularity at work				
2. Ability to work in a team				
3. Inter-personal Relationship				
4. Conscientiousness				
5. Ability to work with minimal supervision				
6. Punctuality				
7. Interest and willingness to perform				
8. Quality of work				
9. Innovativeness				

Additional Comments if any:

.....
.....
.....

Name of Supervisor

.....

Designation.....

Signature and Date

With Official Stamp

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Additional Comments if any:

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Name of Supervisor

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Designation.....

Signature and Date

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ASSESSMENT OF STUDENTS (Office use only)

NATIONAL POSTGRADUATE MEDICAL COLLEGE, FACULTY OF PUBLIC HEALTH AND COMMUNITY MEDICINE
DIPLOMA IN EPIDEMIOLOGY AND BIostatISTICS

DATE OF SUBMISSION OF LOGBOOK_____

GRADING...A.....

B.....

C.....

D.....

COMMENTS.....

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NAME OF ASSESSOR.....

SIGNATURE OF ASSESSOR AND DATE.....