



Observation Report Record

PTA Program
 6375 W. Charleston Blvd.
 Las Vegas, NV 89146

PHYSICAL THERAPIST ASSISTANT

A minimum of 40 hours of observation in a physical therapy setting is recommended for acceptance into the Physical Therapist Assistant Program (PTA). It is recommended that you complete part of your observation in multiple types of physical therapy settings: Acute Hospital (AH), Outpatient Clinic (OP), Inpatient Rehab Hospital (R), Long Term Care (LTC), Home Health (HH), School (S).

Please use this form for recording your clinical observations. The observations must be completed under the direction of a licensed Physical Therapist or Physical Therapist Assistant for application to the PTA Program.

Once this form has been completed, the applicant must submit it with the completion packet to:

Limited Entry Office, Room K216
 College of Southern Nevada
 6375 W. Charleston Boulevard – WCK206
 Las Vegas, NV 89146

Applicant Name

Last

First

Middle

All Last Names Used

Address

Number

Street

Apt. Number

NSHE #

Telephone

City

State

Zip

Day Number

| Date MM/DD/YY | Name of Agency, Address & Phone | General PT Observation | From (Time) | To (Time) | Number of Hours |
|------------------|---------------------------------|---------------------------|----------------|--------------|--------------------|
| | | | | | |

Print Name of PT / PTA

Signature of PT / PTA

| Date MM/DD/YY | Name of Agency, Address & Phone | Neurologic/ Pediatric PT Observation | From (Time) | To (Time) | Number of Hours |
|------------------|---------------------------------|--|----------------|--------------|--------------------|
| | | | | | |

Print Name of PT / PTA

Signature of PT / PTA