Must be completed throughout observational experience and submitted with PTA Application Packet.

LOUISIANA CHRISTIAN UNIVERSITY

Associate of Science
Physical Therapist Assistant

Observation Time Sheet

Location:_____ Contact number_____ (30 hours required)

Date	Time In	Time Out	Signature

Location: _____ Contact number_____ (30 hours required)

Date	Time In	Time Out	Signature

Total Observational Hours: _____