Principles of Clinical Pharmacology (PCP) - V3 Evaluation Form

OMB # 0925-XXXX
Expiration Date: XX/XXXX

1. Where are you currently in your career path?

- ○ Pharmacy student
- ○ Medical student
- ○ Graduate/Ph.D student
- ○ Residency, fellowship, or other training program
- ○ Early career (<5 years in career)
- ○ Established professional
- ○ Other

2. What is your current affiliation?

- ○ Academic
- ○ Industry
- ○ Government
- ○ Private Practice
- ○ Hospital
- ○ Other

3. If you are currently a student or in a training program, where do you hope to start your career?

- ○ Academic
- ○ Industry
- ○ Government
- ○ Private Practice
- ○ Hospital
- ○ Other
- ○ I'm not sure
- ○ N/A

4. Grade the overall quality of the course:

- ○ Excellent
- ○ Very Good
- ○ Good
- ○ Poor

5. Would you recommend this course to your colleagues?

- ○ Yes
- ○ No

6. Please provide additional comments or recommendations for the course:

SUBMIT