Marshall University School of Physical Therapy

2847 5th Avenue Huntington, WV 25702 Tel: 304/696-5610

physicaltherapy@marshall.edu



The School of Physical Therapy requests your help. Please complete the following Survey based on your own experience with our school. Thank you for your time!

Admissions:								
The amount of comm	unic	ation wa	s suf	ficient.				
☐ Strongly Agree Comments:		Agree		Neutral		Disagree		Strongly Disagree
Prerequisite review re	eport	was acc	urate					
☐ Strongly Agree Comments:		Agree	, 🗆	Neutral		Disagree		Strongly Disagree
Admissions Committ	ee wa	as respor	nsive	and helpf	ul.			
☐ Strongly Agree Comments:		Agree		Neutral		Disagree		Strongly Disagree
Accommodations for	alter	native in	tervi	ew times/o	dates w	ere provide	ed.	est.
☐ Strongly Agree ☐ Comments:	Agr	ree 🔲 N	leutra	l 🔲 Disag	gree 🔲	Strongly Di	sagree	☐ Not applicable

Interview:

Amount of time allot	ted for Didac	tic/Clinical Edu	cation overview w	vas sufficient.
☐ Strongly Agree Comments:	□ Agree	□ Neutral	□ Disagree	☐ Strongly Disagree
Amount of time allot	ted for Semi-	structured group	o interviews was su	ıfficient.
☐ Strongly Agree Comments:	□ Agree	□ Neutral	☐ Disagree	☐ Strongly Disagree
The tour of MUSOPT	Γ was helpful	and informative	e.	
☐ Strongly Agree Comments:	□ Agree	□ Neutral	☐ Disagree	☐ Strongly Disagree
Individual meeting w	ith Admissio	n Committee me	ember answered al	l of my questions.
☐ Strongly Agree Comments:	□ Agree	□ Neutral	☐ Disagree	☐ Strongly Disagree
My overall experience	e with Marsh	all University S	chool of Physical	Γherapy was excellent.
☐ Strongly Agree Comments:	☐ Agree	□ Neutral	☐ Disagree	☐ Strongly Disagree
Additional Comment	s:		54.	
Thank you very much f				

along with your supplemental application form to any Admissions Committee member (Drs. Chiu, Davis, Karim, Pfost or Profitt) or faculty/staff. Your feedback is valued and very much appreciated!