



Instructions/Template for Preparing Manuscript for *International Education Trend Issues*) ← 14pt,
bold, all Text BOOK ANTIQUA

(The title should be simple, concise and informative with only the first word capitalized. A shortened version of the title consisting of a maximum of 100 characters (including spaces) for running headers should also be provided.)

ABSTRACT

A concise and factual abstract is required. The abstract should state briefly the purpose of the research, the principal results and major conclusions. An abstract is often presented separately from the article, so it must be able to stand alone. For this reason, References should be avoided, but if essential, then cite the author(s) and year(s). Also, non-standard or uncommon abbreviations should be avoided, but if essential they must be defined at their first mention in the abstract itself. The abstract should be clear, concise, and descriptive. This abstract should provide a brief introduction to the problem, objective of the paper, followed by a statement regarding the methodology and a brief summary of results. The abstract should end with a comment on the significance of the results or a brief conclusion. Abstracts are written in 11 BOOK ANTIQUA, preferably not more than 150 words

Keywords: ← 11pt,
BOOK ANTIQUA
Maximum of 5
keywords separated
by semicolon (;),
crucial to the
appropriate indexing
of the papers, are to
be given. example:
economics;
development; panel
regression;
econometrics
) for foreign, only
abstract in English

INTRODUCTION

The introduction should be clear and provide the issue to be discussed in the manuscript. Before the objective, authors should provide an adequate background, and very short literature survey in order to record the existing solutions, to show which is the best of previous researches, to show the main limitation of the previous researches, to show what do you hope to achieve (to solve the limitation), and to show the scientific merit or novelties of the paper

Containing backgrounds of the problem, depiction and further scrutiny of the problem or the gap between what is idealized and what is the reality, supported by relevant theories and recent research, and objective of the study. The problem should offer a new research value or benefit as an innovative endeavour, written more or less 20% of the whole body including the title and abstract

METHOD

This section must be written out briefly, concisely, clearly, but adequately so that it can be replicated. This section contains explanations of the research approach, subjects of the study, conducts of the research procedure, use of materials and instruments, data collection and analysis techniques. These are not theories. In the case of statistical uses, formulas that are generally known should not be written down. Any specific criteria used by the researcher in collecting and analyzing the research data should be completely described. This section should be written not more than 10% (for qualitative research) or 15% (for quantitative research) of the body.



RESULTS AND DISCUSSION

Example:
Insert Table 1 Here
Insert Figure 1 Here

TABLE: I

	Specification	Applicable
Font Face	Book antiqua	1 Column and 2 Column Word File
Top Margin	0.8"	1 Column and 2 Column Word File
Bottom Margin	0.6"	1 Column and 2 Column Word File
Left Margin	0.8"	1 Column and 2 Column Word File
Right Margin	0.6"	1 Column and 2 Column Word File
Space Between Column	0.3"	2 Column Word Document

The author needs to report the results in sufficient detail so that the reader can see which statistical analysis was conducted and why, and later to justify their conclusions.

Reporting results: The author may assume that the reader has a working knowledge of basic statistics (i.e., typically the contents covered in a 1st statistics course).

Discussion should be clear and concise. The results should summarize (scientific) findings rather than providing data in great detail. Please highlight differences between your results or findings and the previous publications by other researchers.

The discussion should explore the significance of the results of the work, not repeat them. A combined Results and Discussion section is often appropriate. Avoid extensive citations and discussion of published literature.

In discussion, it is the most important section of your article. Here you get the chance to sell your data. Make the discussion corresponding to the results, but do not reiterate the results. Often should begin with a brief summary of the main scientific findings (not experimental results). The following components should be covered in discussion: How do your results relate to the original question or objectives outlined in the Introduction section (what)? Do you provide interpretation scientifically for each of your results or findings presented (why)? Are your results consistent with what other investigators have reported (what else)? Or are there any differences?



The discussion section should:

- Restate the study's main purpose
- Reaffirm the importance of the study by restating its main contributions
- Summarize the results in relation to each stated research objective or hypothesis without introducing new material
- Relate the findings to the literature and the results reported by other researchers
- Provide possible explanations for unexpected or non-significant findings
- Discuss the managerial implications of the study
- Highlight the main limitations of the study that could influence its internal and external validity
- Discuss insightful (i.e., non-obvious) directions or opportunities for future research on the topic

The discussion section should not merely restate the findings reported in the result section or report additional findings that have not been discussed earlier in the article. The focus should instead be on highlighting the broader implications of the study's findings and relating these back to previous research. Make sure that the conclusions you reach follow logically from and are substantiated by the evidence presented in your study (Varadarajan 1996: 5).

CONCLUSION

In this section, the author presents brief conclusions from the results of research with suggestions for advanced researchers or general readers. A conclusion may review the main points of the paper, do not replicate the abstract as the conclusion.

Not only does the author write down the major flaws and limitations of the study, which can reduce the validity of the writing, thus raising questions from the readers (whether, or in what way), the limits in his studies may have affected the results and conclusions. Limitations require critical judgment and interpretation of their impact. The author should provide the answer to the question: is this a problem with error, method, validity, and or otherwise?

Writing an academic article is a challenging but very fulfilling endeavor. Hopefully, the guidelines presented here will enable you to write your first academic article with relative ease. Students, however, often underestimate the time required to produce a "polished" first effort. You cannot write a proper research article in a weekend or even a week. It is, therefore, extremely important to allow yourself enough time –at least three to four weeks – to work on the successive draft.

Acknowledgment

Recognize those who helped in the research, especially funding supporters of your research. Include individuals who have assisted you in your study: Advisors, Financial supporters



REFERENCE

The reference contains a list of journals, books, or the other publications referenced in published manuscripts in the last 10 years (80%). Minimum amount of reference is 10 pieces, and 70% of it is a journal library. *The International Journal of Business, Law, and Education literature follows the American Psychological Association (APA) 6th Edition*. Writing a reference (and citation) is suggested using the **Mendeley, Andnote, or Zotero app**.

- Adams, C. L., Glavin, K., Hutchins, K., Lee, T., & Zimmermann, C. (2008). An Evaluation of the Internal Reliability, Construct Validity, and Predictive Validity of the Physical Therapist Clinical Performance Instrument (PT CPI). *Journal of Physical Therapy Education*, 22(2), 42-50. <https://doi.org/10.1097/00001416-200807000-00007>
- Clouder, L. (2000). Reflective Practice in Physiotherapy Education: A critical conversation. *Studies in Higher Education*, 25(2), 211-223. <https://doi.org/10.1080/713696142>
- Dalton, M., Davidson, M., & Keating, J. (2011). The Assessment of Physiotherapy Practice (APP) is a valid measure of professional competence of physiotherapy students: A cross-sectional study with Rasch analysis. *Journal of Physiotherapy*, 57(4), 239-246. [https://doi.org/10.1016/S1836-9553\(11\)70054-6](https://doi.org/10.1016/S1836-9553(11)70054-6)
- Dalton, M., Davidson, M., & Keating, J. L. (2012). The Assessment of Physiotherapy Practice (APP) is a reliable measure of professional competence of physiotherapy students: A reliability study. *Journal of Physiotherapy*, 58(1), 49-56. [https://doi.org/10.1016/S1836-9553\(12\)70072-3](https://doi.org/10.1016/S1836-9553(12)70072-3)
- Donaghy, M., & Morss, K. (2007). An evaluation of a framework for facilitating and assessing physiotherapy students' reflection on practice. *Physiotherapy Theory and Practice*, 23(2), 83-94. <https://doi.org/10.1080/09593980701211952>
- Fitzgerald, L. M., Delitto, A., & Irrgang, J. J. (2007). Validation of the Clinical Internship Evaluation Tool. *Physical Therapy*, 87(7), 844-860. <https://doi.org/10.2522/ptj.20060054>
- Hrachovy, J., Baggett, K., Cantwell, J., Clopton, N., Garber, T., & Schreiber, J. (2000). *Use of The Blue MACS: Acceptance by Clinical Instructors and Self-Reports of Adherence*. *Physical Therapy*. https://www.researchgate.net/publication/12449971_Use_of_The_Blue_MACS_Acceptance_by_Clinical_Instructors_and_Self-Reports_of_Adherence
- Ijudin. (2020). the Influence of Assessment, Self-Efication Through Student Learning Outcomes in Indonesian Language. *Jisae: Journal of Indonesian Student Assesment and Evaluation*, 6(1), 47-54. <https://doi.org/10.21009/jisae.061.04>
- IXER, G. (1999). There's No Such Thing As Reflection. *British Journal of Social Work*, 29(4), 513-527. <https://doi.org/10.1093/bjsw/29.4.513>
- Jette, D. U., Bertoni, A., Coots, R., Johnson, H., McLaughlin, C., & Weisbach, C. (2007). Clinical Instructors' Perceptions of Behaviors That Comprise Entry-Level Clinical Performance in Physical Therapist Students: A Qualitative Study. *Physical Therapy*, 87(7), 833-843. <https://doi.org/10.2522/ptj.20070003>



- Kathleen Luedtke Hoffmann, Loretta Schoen Dillon, Carolyn Utsey, & Joe Tomaka. (2012). Is There a Relationship between Performance during Physical Therapist Clinical Education and Scores on the National Physical Therapy Examination (NPTE) | Semantic Scholar. *Journal of Physical Therapy Education*. <https://www.semanticscholar.org/paper/Is-There-a-Relationship-between-Performance-during-Luedtke-Hoffmann-Dillon/edbf96f9a47ab8ac89ea138a99fe325cab93960>
- KF, S., & GM, J. (2002). *Handbook of teaching for physical therapists* (2nd ed.). Butterworth Heineman.
- Kigin, C. (2009). A Systems View of Physical Therapy Care: Shifting to a New Paradigm for the Profession. *Physical Therapy*, 89(11), 1117-1119. <https://doi.org/10.2522/ptj.2009.89.11.1117>
- Lois Stickley. (2005). *Content validity of a clinical education performance tool: The physical therapist manual for the assessment of clinical skills* | Request PDF. *Journal of Allied Health*. https://www.researchgate.net/publication/7897041_Content_validity_of_a_clinical_education_performance_tool_The_physical_therapist_manual_for_the_assessment_of_clinical_skills
- Loomis, J. (1985). Evaluating Clinical Competence of Physical Therapy Students. Part 2: Assessing the Reliability, Validity and Usability of a New Instrument - PubMed. *Physiotherapy Canada*, 37((2)), 91-98. <https://pubmed.ncbi.nlm.nih.gov/10270853/>
- Meldrum, D., Lydon, A. M., Loughnane, M., Geary, F., Shanley, L., Sayers, K., Shinnick, E., & Filan, D. (2008). Assessment of undergraduate physiotherapist clinical performance: investigation of educator inter-rater reliability. *Physiotherapy*, 94(3), 212-219. <https://doi.org/10.1016/j.physio.2008.03.003>
- Mori, B., Brooks, D., Norman, K. E., Herold, J., & Beaton, D. E. (2015). Development of the canadian physiotherapy assessment of clinical performance: A new tool to assess physiotherapy students' performance in clinical education. *Physiotherapy Canada*, 67(3), 281-289. <https://doi.org/10.3138/ptc.2014-29E>
- Muhamad, Z., Ramli, A., & Amat, S. (2015). Validity and Reliability of the Clinical Competency Evaluation Instrument for Use among Physiotherapy Students: Pilot study. *Sultan Qaboos University Medical Journal*, 15(2), e266-74. <http://www.ncbi.nlm.nih.gov/pubmed/26052461>
- Murphy, S., Dalton, M., & Dawes, D. (2014). Assessing physical therapy students' performance during clinical practice. *Physiotherapy Canada*, 66(2), 169-176. <https://doi.org/10.3138/ptc.2013-26>
- O'Connor, A., McGarr, O., Cantillon, P., McCurtin, A., & Clifford, A. (2018). Clinical performance assessment tools in physiotherapy practice education: a systematic review. *Physiotherapy (United Kingdom)*, 104(1), 46-53. <https://doi.org/10.1016/j.physio.2017.01.005>
- Oli, M. C. (2018). The Assessment Practices by Content-faculty, Student-teaching Supervisor and Cooperating Mentors of Pre-professional Mathematics Teachers in State Universities in Cagayan Valley Region in the Philippines â€. *Jisae*:



- Journal of Indonesian Student Assessment and Evaluation*, 4(2), 60–82.
<https://doi.org/10.21009/jisae.042.05>
- Proctor, P. L., Dal Bello-Haas, V. P., McQuarrie, A. M., Sheppard, M. S., & Scudds, R. J. (2010). Scoring of the physical therapist clinical performance instrument (PT-CPI): Analysis of 7 years of use. *Physiotherapy Canada*, 62(2), 147–154.
<https://doi.org/10.3138/physio.62.2.147>
- Rethans, J. J., Norcini, J. J., Barón-Maldonado, M., Blackmore, D., Jolly, B. C., LaDuca, T., Lew, S., Page, G. G., & Southgate, L. H. (2002). The relationship between competence and performance: Implications for assessing practice performance. *Medical Education*, 36(10), 901–909.
<https://doi.org/10.1046/j.1365-2923.2002.01316.x>
- Roach, K. E., Frost, J. S., Francis, N. J., Giles, S., Nordrum, J. T., & Delitto, A. (2012). Validation of the Revised Physical Therapist Clinical Performance Instrument (PT CPI): Version 2006. *Physical Therapy*, 92(3), 416–428.
<https://doi.org/10.2522/ptj.20110129>
- Umar, A. taufiq. (2019). the Effect of Problem Solving Model and Scoring Type of Multiple-Choice Formative Tests on Student High Order Thinking Skills (Hots) Ability. *Jisae: Journal of Indonesian Student Assessment and Evaluation*, 4(1), 22–29.
<https://doi.org/10.21009/jisae.041.03>
- Policy Statement: Description of Physical Therapy. United Kingdom, (2011).
- World Confederation for Physical Therapy. (2011). *WCPT guideline for physical therapist professional entry level education*. 1–42.
https://www.wcpt.org/sites/wcpt.org/files/files/Guideline_PTEducation_complete.pdf
- Yoshino, J., & Usuda, S. (2013). The reliability and validity of the clinical competence evaluation scale in physical therapy. *Journal of Physical Therapy Science*, 25(12), 1621–1624. <https://doi.org/10.1589/jpts.25.1621>