Site Supervisor's Evaluation of Internship Supervisee

CSD 6900 – Supervised Clinical Experience (Internship) Department of Counseling and Student Development, Eastern Illinois University



Supervisee Name	Check one: Midterm Final
Site Supervisor's Name	Date:
Instructions: Please evaluate your supervisee's experience by checking your n	esponse to the following items.

Rating Scale:

- » Excellent = Supervisee provides consistent evidence of excellence in the competency.
- » Above Average = Supervisee provides evidence of above average skills in the competency.
- » Average = Supervisee provides evidence of average skills in the competency.
- » Below Average = Supervisee provides evidence of below average skills in the competency.
- » Poor = Supervisee needs remedial work in this area.

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CHARACTERISTICS	Poor	Average	Average	Average	Excellent	Applicable
1. Responsible:						
Comments:						
O Chaus initiativa						
2. Shows initiative						
Comments:						
3. Cooperative						
Comments:						
Commonts.						
4. Professional (i.e., behavior, dress, attitude)						
Comments:						
5. Punctual and dependable						
Comments:						
COMMUNICATION.						

SUPERVISION	Poor	Below Average	Average	Above Average	Excellent	Not Applicable
Capacity to accept and act on constructive criticism Comments:						
Commitment to developing professional competence Comments:						
Seeks help and directions Comments:						
4. Prepares for supervision Comments:						

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SUPERVISION	Poor	Below Average	Average	Above Average	Excellent	Not Applicable
Ability to communicate clearly and effectively in speech and writing Comments:	1 001	Aveluge	Average	Average	Exochen	Арриоцы
Actively works to recognize and overcome deficits Comments:						
Evaluation Areas:		•				
1. What management, organizational, and administrative skills did	l you see	e the supe	ervisee de	veloping?		
2. Describe the quality of the supervisee's collegial relationships.						
3. Describe the quality of the supervisee's external relationships (parents,	commun	ity agenci	es, etc.).		
4. How did the supervisee respond to any ethical, diversity, and/o	r gendei	issues e	ncountere	d?		
5. Describe the quality of the supervisee's written records and rep	orts.					
6. Describe the quality of the supervisee's individual and/or group	counse	ling skills.				
Describe the supervisee counseling effectiveness. Please included and intervention selection skill.	ude supp	oort mana	gement, a	assessme	nt/diagnos	is,
Final Evaluation:						
In your profession opinion, should the supervisee receive a passion	ng grade	in Super	vised Clin	ical Exper	rience (Inte	ernship):
I YES, with no reservations.						
I YES, but with some reservations (Please explain, if not stated in	n this ev	aluation.)				
I NO. Please contact the EIU Faculty Supervisor in charge of Int	ernship	mmediate	ely.			
Signature of Site Supervisor:		Da	ate:			
My signature indicates that I have read the above report and have necessarily indicate that I agree with the report in part or in whole		sed the co	ntent with	n my supe	rvisor. It d	oes not

Signature of Supervisee: _____ Date: _____