

FIELD-WORK SUPERVISOR EVALUATION FORM (MA only)

Name _____ EDCO 292 supervisor _____

I. Please circle the number for each of the following, which best describes the competence level of the internship counselor's fieldwork for this semester:

1. Achievement of objectives:

1. Satisfactory 2. Somewhat satisfactory 3. Unsatisfactory

2. Demonstrated knowledge about counseling theories and their applications

1. Satisfactory 2. Somewhat satisfactory 3. Unsatisfactory

3. Observed individual counseling skills:

1. Satisfactory 2. Somewhat satisfactory 3. Unsatisfactory

4. Observed group counseling skills:

1. Satisfactory 2. Somewhat satisfactory 3. Unsatisfactory

5. Demonstrated sensitivity for and skill in working with clients from diverse cultural background.

1. Satisfactory 2. Somewhat satisfactory 3. Unsatisfactory

6. Ability demonstrated to utilize resources within the setting:

1. Satisfactory 2. Somewhat satisfactory 3. Unsatisfactory

II. Comments

Field-Work Supervisor Signature _____ Date _____

(Please return this completed form to your EDCO 292 supervisor at Department of Counselor Education, San Jose State University, One Washington Square, San Jose, CA 95192-0073.