

APPENDIX H-2
THE COLLEGE OF NEW JERSEY
DEPARTMENT OF COUNSELOR EDUCATION
PRACTICUM EVALUATION OF COUNSELOR
BY SITE SUPERVISOR

Completed after 100 Hours

STUDENT'S NAME: _____

SITE SUPERVISOR'S NAME: _____

NAME OF SITE: _____

PERIOD COVERED BY THIS EVALUATION: _____

DIRECTIONS: In your evaluation, assess the student's performance relative to a beginning Masters level student counselor. When the evaluation form has been completed, please forward to the student's practicum instructor (group supervisor).

Please circle the number which best evaluates the student for the above specified time period.

	Not Observed	Needs Improvement	Meets Expectations	Exceeds Expectations
1. Appropriate professional attire.	0	1 2	3 4	5 6
2. Readily accepts responsibility for the supervision session.	0	1 2	3 4	5 6
3. Completes tasks in a timely fashion.	0	1 2	3 4	5 6
4. Is prompt in attending all scheduled supervision meetings and client sessions.	0	1 2	3 4	5 6
5. Understands the structure and function of the school/agency.	0	1 2	3 4	5 6
6. Is knowledgeable of the policies and procedures of the school/agency.	0	1 2	3 4	5 6
7. Works collaboratively with supervisors, colleagues, and staff.	0	1 2	3 4	5 6
8. Utilizes proper strategies for assessment and intervention.	0	1 2	3 4	5 6

