Site Supervisor Evaluation
CMHC Internship 699B & CPSY 699C

Intern Name: ___________________________ Semester/Year ___________________________

Please complete this evaluation of the counseling internship student after they have completed 16 weeks of internship. Please review this evaluation with the intern and return a copy of the completed evaluation to the WAU faculty supervisor for inclusion in the student’s semester grade. Thank you.

Rate the intern’s functioning based on the following rubric:

<table>
<thead>
<tr>
<th>Points</th>
<th>Behavior</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>3</td>
<td>ADVANCED</td>
<td>Consistently demonstrates outstanding performance</td>
</tr>
<tr>
<td>2</td>
<td>TARGET</td>
<td>Demonstrates skill development congruent with an intern</td>
</tr>
<tr>
<td>1</td>
<td>DEVELOPING</td>
<td>Demonstrates inconsistently or below the level of an intern</td>
</tr>
<tr>
<td>0</td>
<td>UNSATISFACTORY</td>
<td>Does not demonstrate this skill</td>
</tr>
<tr>
<td>N/A</td>
<td>NOT APPLICABLE</td>
<td>No opportunity to observe or unable to evaluate</td>
</tr>
</tbody>
</table>

Professional Behaviors

- Awareness of agency/educational setting policies 3 2 1 0 N/A
- Adherence to policies and procedures 3 2 1 0 N/A
- Timeliness of reports 3 2 1 0 N/A
- Attendance 3 2 1 0 N/A
- Preparation and follow-up 3 2 1 0 N/A
- Dependability 3 2 1 0 N/A

Comments: __________________________________________

Attitude

- Willingness to perform responsibilities 3 2 1 0 N/A
- Openness to new ideas 3 2 1 0 N/A
- Motivation 3 2 1 0 N/A
- Initiative 3 2 1 0 N/A
- Ability to work cooperatively with staff and develop positive interpersonal relationships 3 2 1 0 N/A
- Commitment 3 2 1 0 N/A
- Awareness of self 3 2 1 0 N/A

Comments: __________________________________________
### Counseling Skills

- Ability to establish therapeutic relationships: 3 2 1 0 N/A
- Competence in basic counseling skills: 3 2 1 0 N/A
- Knowledge of therapeutic dynamics: 3 2 1 0 N/A
- Skill in diagnosis/assessment and establishing treatment plans: 3 2 1 0 N/A
- Appropriate use of intervention techniques and strategies: 3 2 1 0 N/A
- Knowledge of counseling process, stages and outcomes: 3 2 1 0 N/A
- Competence in writing appropriate notes and reports: 3 2 1 0 N/A
- Adherence to ethical standards: 3 2 1 0 N/A
- Knowledge of referral resources: 3 2 1 0 N/A

**Comments:**

---

### Supervision Process

- Responsiveness: 3 2 1 0 N/A
- Perceptiveness: 3 2 1 0 N/A
- Willingness to disclose as appropriate: 3 2 1 0 N/A
- Ability to articulate issues, questions, and concerns: 3 2 1 0 N/A
- Appropriate use of time and resources: 3 2 1 0 N/A
- Participation in staff meetings/school activities: 3 2 1 0 N/A

**Comments:**

---

Briefly identify areas in which this counselor’s training program seems to be particularly strong:

Briefly identify areas in which this counselor’s training program is limited/needs strengthening:

---

**Site Supervisor Signature**

**Date**

**Faculty Supervisor Signature**

**Date**

**Intern Signature**

**Date**