

ON-SITE SUPERVISOR EVALUATION (PCC) – Completed *each* semester

Student's Name: _____

Total Hours Completed On Site to Date: _____

Site: _____

Site Supervisor: _____

Today's Date: _____

Please rate the student according to the following scale, being as fair and objective as possible. Feel free to add any comments, in the spaces provided, or on the back of these forms:

Attitude Toward Work	Excellent	Strong	Average	Weak	Poor
The student demonstrates:					
Ability to take initiative and perform					
Promptness					
Daily Preparation					
Cooperativeness					
Professionalism (in behavior, dress, attitude, etc.)					
Comments on Attitudes Toward Work:					

Personal Characteristics	Excellent	Strong	Average	Weak	Poor
The student demonstrates:					
Self-awareness and self-understanding					
Emotional stability					
Self-control					
Honesty					
Sense of Fairness, Justice, and Client Advocacy					
Capacity to accept and act on constructive criticism					
Ability to communicate clearly and effectively					
Ability to be tactful					
Ability to grasp and successfully adapt to new situations					
Personal commitment to developing professional competencies					
An investment of time and energy in becoming a counselor					
An ability to recognize own competencies					
Active work to recognize and overcome deficits					
An ability to use Standard English and grammar correctly					
Comments on Attitudes Toward Personal Characteristics:					

Attitude Toward Clients	Excellent	Strong	Average	Weak	Poor
The student demonstrates:					
Genuine interest in and acceptance of clients					
Ability to understand client's point of view					
Ability to establish and maintain rapport					
Ability to successfully relate to diverse types of clients					
An awareness of and adherence to ethical standards					
An understanding of developmental stage(s) of tasks of clients					
Ability to accurately assess the psychological needs of clients					
Ability to match individual client needs to appropriate interventions					
Comments on Attitudes Toward Clients:					

Efforts to become a Valuable Part of the Agency	Excellent	Strong	Average	Weak	Poor
The student demonstrates:					
Effort to become knowledgeable about all aspects of agency functioning, including referral sources					
Ability to function as a team member					
Prompt and accurate completion of all paperwork					
Willingness to work within the theoretical and therapeutic framework of the agency					
Comments on Efforts to become a Valuable Part of the Agency:					

Counseling Skills and Process	Excellent	Strong	Average	Weak	Poor
The student demonstrates:					
Knowledge of the population that is the focus of the student's caseload					
Evidence that, when needed, the student has done extra research and work to understand appropriate interventions					
Recognition and transmission of understanding of cognitive components (spoken & implied) of clients' messages					
Recognition and transmission of understanding of affective components (spoken & implied) of clients' messages					
Understanding of the dynamics of counseling sessions					
Ability and effort to identify client strengths, as well as limitations					
Comments on Counseling Skills and Process:					

Counseling Skills	Excellent	Strong	Average	Weak	Poor
The student demonstrates:					
Beginning Counseling Skills					
Active listening/attending					
Empathy					
Reflection of feelings					
Confrontation					
Silence					
Focusing/staying present with the client					
Use of prompts, probes, and open-ended questions					
Defining the problem					
Exploring alternatives					
Comments on Counseling Skills:					

OVERALL RATING:

Please rate the following:

	Excellent	Strong	Average	Weak	Poor
a. Counseling Ability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Personal Growth/Maturity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Potential for overall success similar to current field placement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Activities Supervised:

Counselor Trainee’s Strengths, in Counseling Skills, Personal, and Professional Development:

Counselor Trainee’s Needs for Improvement, in Counseling Skills, Personal, and Professional Development:

Overall Impression of Counselor Trainee’s Ability to Function as a Professional Counselor:

In Your Professional Opinion, should the Counselor Trainee Receive a Passing Grade in Field Experience?

- YES, with no reservations
- YES, but with some reservations (please explain, if not stated in this evaluation)
- NO. Please contact the university faculty member in charge of Field Experience immediately.

Feel free to put any additional comments on the reverse side of this form.

THANK YOU for providing supervision to this student.

***SITE SUPERVISORS:** Thank you for your fair and objective feedback. California State University, Stanislaus Counselor Education program is committed to graduating excellent counselors. Please check here if you would like the Faculty Member in charge of Field Experience to contact you regarding any concerns with this student or to discuss any aspect of the program.*

Site Supervisor Signature: _____ Date: _____

University Supervisor Signature: _____ Date: _____