SITE SUPERVISOR’S ASSESSMENT OF INTERN PERFORMANCE

INTERN:________________________________________________________UMS#___________

FIELD SUPERVISOR:_________________________________________________________________

SCHOOL:___________________________ADDRESS:_______________________________________

GRADE LEVEL(S):___________________________________________________________________

DATES of ASSESSMENT: MID-POINT______________________FINAL______________________

Please keep a copy for your records and provide a copy for the student and University supervisor.

Please read each statement and then rate the intern’s current level of competence to perform the function using the following scale.

1 = not competent
2 = somewhat competent
3 = moderately competent
4 = generally competent
5 = highly competent

NO = No opportunity to assess

School Guidance Curriculum

1. ______ able to provide instruction to assist a class of students in academic achievement, career planning, and personal-social behavior.

2. ______ able to work with other faculty to integrate guidance curriculum with other subject areas.

3. ______ able to conduct planned small groups outside the classroom to respond to students’ identified needs and interests.

4. ______ able to conduct workshops and informal sessions for parents to address the needs of students.
Individual Student Planning

5. ________able to work with individual students or small groups to analyze and evaluate test information and other data relating to abilities, interests, skills, and achievement in planning academic and career domains.

6. ________able to work with individuals or small groups to advise them in academic, career, and personal-social planning.

7. ________able to assist students as they plan for post-secondary education.

8. ________able to assist students as they plan for post-secondary occupations.

Responsive Services

9. ________able to exchange and share information with families, faculty, and administrators for purposes of supporting students in their academic, career, and personal-social development.

10. ________able to assist individual students to make changes for advancement in academic, career, and personal-social domains.

11. ________able to provide counseling and support to students, families, and faculty in response to emergency situations.

12. ________able to refer students and families in need to school based and community based resources.

System Support

13. ________able to work with faculty, families, administrators, and community resources to improve student success.

14. ________able to identify school based and community based resources that can support student success.

15. ________able to assist families in identifying their children’s needs and assist families in accessing available school based and community based resources to support their child.

16. ________able to use data to identify areas of need in school that affect student progress in academic, career, and personal-social development.

17. ________able to use data to measure the success of interventions and programs supporting achievement, career, and personal-social development.
18. ______ able to serve as a liaison with teachers, families, administrators, and community resources to facilitate successful student development.

19. ______ able to provide leadership when working with faculty, administrators, families, and community resource to support equitable opportunity for students.

20. ______ able to provide effective advocacy for the elimination of performance gaps among different economic, gender, race, and ethnic groups.

Please add any comments about the intern’s performance that were not addressed on this evaluation form.

How has the intern’s services benefited the students with whom he or she worked?

Do you have any specific recommendations for professional development?

Do you have any recommendations regarding the professional preparation of the intern? Your feedback is valued and will be used to enhance future training.

**Verification of Supervision Hours**

The student and supervisor have engaged in ______ hours of supervision since the start of the internship experience.

The signatures below indicate that the evaluation and number of hours of internship supervision are true and correct, and that this form has been reviewed and agreed upon by both the student and supervisor.

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