

Clinical Placement MIDTERM Evaluation

Counseling Student's Name: _____

To the Site Supervisor:

Thank you for supervising our NCCU counseling student during their field experience. This formal evaluation is to be completed at the midpoint of the semester and gives both the faculty supervisor and student preliminary feedback about how things are progressing. Once completed, please enclose the evaluation in a sealed envelope, sign across the sealed flap, and return it to the faculty supervisor by way of your student counselor OR email a scanned copy of the evaluation from your business email address.

Your name: _____

Your business address: _____

Telephone #: _____ email: _____

Instructions:

Please check the individual elements indicated below, both foundational skills and dispositions.

For most of the elements, we ask that you rate the student on the following scale:

- 1: Below Standard
- 2: At Standard
- 3: Above Standard
- 4: Well Above Standard
- UR: Unable to Rate

FOUNDATIONAL SKILLS	1 Below Std	2 At Std	3 Above Std	4 Well Above	UR
1. Uses general counseling skills well					
2. Understands crisis intervention principles and practice					
3. Shows concern for the welfare of clients					
4. Recognizes personal limits and asks for help when necessary					
5. Demonstrates the ability to establish and maintain counseling relationships within ethical standards					
6. Shows empathic understanding of the issues of the client					
7. Relates to others with ease and builds rapport and trust					
8. Demonstrates initiative and is able to work autonomously with minimal guidance					
9. Exhibits clarity in speech and language patterns and in cognitive thought					
10. Facilitates good communication and interpersonal relationships					
11. Counsels using a model consistent with a counseling theory appropriate for the client population					
12. Uses diagnostic / assessment skills					
DISPOSITIONS	1 Below Std	2 At Std	3 Above Std	4 Well Above	UR
13. Relates well to coworkers					
14. Acts with personal integrity					
15. Demonstrates punctuality					
16. Demonstrates responsibility for work					
17. Demonstrates the capacity to accept and profit from constructive feedback					
18. Exhibits self-control , poise, and emotional stability					
19. Demonstrates professionalism in dress and presentation					
20. Adheres to confidentiality					
21. Responds with an affirming and respectful attitude about the cultural background of diverse clients					

Please indicate what things you identify as the **student's strengths**.

Please indicate what things you identify as the **student's areas of growth and improvement**.

SIGNATURE

Printed Name

Date