HELPING PROFESSIONAL-IN-TRAINING CHECKLIST
SITE SUPERVISOR/SITE MENTOR EVALUATION

| Student's Name: ____________________________ | Date: ________________ |
| _____ School (or) _____ Clinical Mental Health (or) _____ Human Services |
| _____ Practicum (or) _____ Internship (or) _____ Field Experience |
| _____ Interim (or) _____ Final Evaluation |

CHECKLIST COMPLETED BY SITE SUPERVISOR/SITE MENTOR:

Name of On-site Supervisor/Mentor: ____________________________

Agency or School Name: ____________________________

Period Covered by Evaluation: From: ________________ To: ________________

This evaluation is intended to help the student, agency/school, and University assess the student's progress in the development of the knowledge, values, and skills necessary for the practice of Counseling or Human Services. The evaluation guide presented here is a tool to assist in that process. Feel free to include additional areas or criteria which you believe are important.
INDICATE COMPETENCY BY A CHECK IN THE APPROPRIATE COLUMN

Students are rated on 6 competency areas. Each of those 6 areas is listed below. Grade according to your supervisees’ counselor-in-training developmental level (i.e., Practicum, Internship 1, Internship 2). Please use the attached rubric on the last page. Circle the number that corresponds with your assessment.

When rating your supervisee on each of the 6 competencies, use the following rating scale:

I. PERSONAL AND PROFESSIONAL COMPETENCIES

Please use the following indicators to assess the above competency: Punctuality; Attendance; Ability to follow through and complete tasks; Ability to meet deadlines; Responsibility for actions; Commitment to the helping profession; Initiative and willingness to become involved; Adherence to professional and ethical practices; Professional appearance; Professional judgment; Ability to work and get along with others (e.g., colleagues, parents, teachers, administration, supervisors, etc.).

Are any of the above indicators a particular strength or weakness for your supervisee? If yes – please elaborate below:
____________________________________________________________________________________

II. USE OF SUPERVISION:

Please use the following indicators to assess the above competency: Initiative in seeking help from supervisor/mentor; Openness to new ideas; Receptivity to feedback.

Are any of the above indicators a particular strength or weakness for your supervisee? If yes – please elaborate below:
____________________________________________________________________________________

III. USE OF RESOURCES

Please use the following indicators to assess the above competency: Skill in using school and/or community and its resources; Knowledge of school and/or agency programs and resources; Awareness of client/student-requested resources; Skill in using a variety of resources; Skill in making referrals.
Are any of the above indicators a particular strength or weakness for your supervisee? If yes – please elaborate below:

____________________________________________________________________________________

IV. SELF-ORGANIZATION

Please use the following indicators to assess the above competency: Ability to organize, and carry out a work plan; Ability to keep appropriate documentation; Professional discipline in use of time; Initiative in involving self in learning activities; Completion of assigned tasks.

Are any of the above indicators particular strength or weakness for your supervisee? If yes – please elaborate below:

____________________________________________________________________________________

V. COUNSELING SKILLS

Please use the following indicators to assess the above competency: Establishment of rapport; Goal-setting with students/clients; Use of effective strategies; Assessment of student’s/client’s progress; Effective termination with students/clients; Effective group counseling skills; Accurate assessment of students’/clients’ needs; Consideration of multicultural factors; Consideration of developmental factors.

Are any of the above indicators particular strength or weakness for your supervisee? If yes – please elaborate below:

____________________________________________________________________________________

VI. COMMUNICATION SKILLS

Please use the following indicators to assess the above competency: Writing Skills; Oral Skills.

Are any of the above indicators particular strength or weakness for your supervisee? If yes – please elaborate below:

____________________________________________________________________________________
VII.  OVERALL COMPETENCE IN COUNSELING OR HUMAN SERVICES PRACTICE  
(Final evaluation only) 
Place a checkmark beside the description that most accurately reflects where your 
Supervisee is at the end of the semester.

_____ 1. Exceptional performance; excels in most areas of competence; very well qualified 
for entry-level Counseling or Human Services position. (Pass)

Comments:

_____ 2. Consistently above average performance; better than normally expected; well 
qualified for entry-level Counseling or Human Services position. (Pass)

Comments:

_____ 3. Normally expected performance; consistently meets requirements; qualified for 
entry-level Counseling or Human Services position. (Pass)

Comments:

_____ 4. Sometimes meets minimum requirements; needs more than the usual supervision; 
not yet qualified for entry-level Counseling or Human Services position. (Fail)

Comments:

_____ 5. Evidence of inadequate performance; corrective steps should be taken; probably not 
a good candidate to become a Counselor or Human Services professional. (Fail)

Comments:
What areas do you believe the student should focus on in the future to enhance his/her competence as a professional counselor or human services professional?

Would you be willing to serve as an on-site supervisor for another student in the future?

Was the administrative support from the University adequate? (If not, make suggestions.)

Additional Comments:

I HAVE SHARED THIS COMPLETED FORM WITH THE STUDENT. _____ Yes _____ No

Site Supervisor Signature ___________________________ Date ____________

Student Signature ___________________________ Date ____________

University Supervisor Signature ___________________________ Date ____________
<table>
<thead>
<tr>
<th>Grade</th>
<th>Description</th>
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<tbody>
<tr>
<td>5 = High</td>
<td>The professional counselor performs extremely well in this area; demonstrates advanced mastery of the skill.</td>
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<tr>
<td>4 = High Average</td>
<td>The professional counselor’s performance level is more than adequate in this area; consistently demonstrates competence and completing all components of the skill</td>
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<tr>
<td>3 = Average</td>
<td>The professional counselor possesses adequate competence in this area.</td>
</tr>
<tr>
<td>2 = Low Average</td>
<td>The professional counselor possesses competence in this area but needs to improve performance (e.g., not consistently performing or not completing all components of the skill).</td>
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<tr>
<td>1 = Low</td>
<td>The professional counselor clearly lacks competence in this area (e.g., skill is being ineffectively or incorrectly demonstrated. Developmentally, it is reasonable for beginning counselors-in-training to perform at this level on some skills, particularly more advanced skills.</td>
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