MOUNT MARY UNIVERSITY
DEPARTMENT OF COUNSELING
MASTER OF SCIENCE IN COUNSELING

EVALUATION OF SITE SUPERVISOR FOR PRACTICUM/INTERNSHIP STUDENTS
(To be completed by the practicum/internship student the last semester of placement)

Directions: The student completes this form at the end of each semester of field experience. The completed form should be turned in to your Mount Mary University Practicum/Internship Instructor.

Supervisor's Name: Dino Arestegui

Supervisor to be Evaluated: On-Site or University

1 = Strongly Disagree 2 = Disagree 3 = Agree 4 = Strongly Agree N/A = Not Applicable

<table>
<thead>
<tr>
<th>RATING CATEGORIES</th>
<th>RATING</th>
</tr>
</thead>
<tbody>
<tr>
<td>I. My Supervisor:</td>
<td></td>
</tr>
<tr>
<td>1. Explained his/her role as my supervisor</td>
<td>1 2 3 4 n/a</td>
</tr>
<tr>
<td>2. Made me feel at ease with the supervisory process</td>
<td>1 2 3 4 n/a</td>
</tr>
<tr>
<td>3. Gave me feedback about my role as a counselor that was accurate and that I could use</td>
<td>1 2 3 4 n/a</td>
</tr>
<tr>
<td>4. Helped me clarify the issues that my client brought to the session</td>
<td>1 2 3 4 n/a</td>
</tr>
<tr>
<td>5. Assisted me in understanding my own feelings about the client and his/her issues</td>
<td>1 2 3 4 n/a</td>
</tr>
<tr>
<td>6. Encouraged me to develop a plan to work with specific clients</td>
<td>1 2 3 4 n/a</td>
</tr>
<tr>
<td>7. Modeled appropriate counseling techniques when necessary</td>
<td>1 2 3 4 n/a</td>
</tr>
</tbody>
</table>

II. My Supervisor helped Promote:
8. My professional identity by encouraging membership in professional organizations: 1 2 3 4 n/a
9. Professional standards by encouraging certification and accreditation of supervisors by accrediting bodies (State and National): 1 2 3 4 n/a
10. Legal and ethical practice by discussing and modeling appropriate ethical standards: 1 2 3 4 n/a
11. I Felt: Confident of the counseling skills of my supervisor: 1 2 3 4 n/a
12. My supervisor respected me and was concerned with my professional growth: 1 2 3 4 n/a
13. My supervisor was committed to his/her role as a supervisor: 1 2 3 4 n/a
14. Motivated and encouraged me: 1 2 3 4 n/a
15. My supervisor served as an appropriate professional role model: 1 2 3 4 n/a
16. Supervision sessions allowed for personal and professional growth: 1 2 3 4 n/a
17. Recognizes his/her own limitations: 1 2 3 4 n/a
18. My supervisor was genuine, congruent, empathic, and honest: 1 2 3 4 n/a

IV. My Supervisor Helped Me:
19. Clarify my own ideas about counseling theory: 1 2 3 4 n/a
20. Focus on specific counseling strategies to assist the client: 1 2 3 4 n/a
21. Develop techniques to resolve conflict: 1 2 3 4 n/a

Please complete the following demographic questions. The demographics will be used for descriptive analysis in research.

Your gender: F  Supervisor's gender: M
Your age: 41  Supervisor's age: 60+
Your ethnic background: Hispanic (African American, Asian, Caucasian, Hispanic, Native American, Other)
Your supervisor’s ethnic background: Hispanic (African American, Asian, Caucasian, Hispanic, Native American, Other)
Your counseling specialty area: Clinical/Community
Your supervisor’s specialty area: Community
(community, school, or pastoral)

Number of years that your supervisor has been a counselor: 30+

APPENDIX F

Mount Mary University

MOUNT MARY UNIVERSITY
COUNSELING DEPARTMENT
MASTER OF SCIENCE IN COUNSELING - CMHC CONCENTRATION

EVALUATION FORM FOR PRACTICUM/INTERNSHIP STUDENTS
(To be completed by the site supervisor)

Name of Student:__________________________

Date:__________ Name of Person Completing Form:__________________________

Title:__________________________________

Site:__________________________________

Address:________________________________

Phone:__________________________________

E-Mail address:__________________________

TO THE SUPERVISOR:
We appreciate your willingness to have our student(s) placed at your agency/organization. It is important to have your impressions and observations of the student’s growth and development as a counselor. Your feedback will be a component of the final course grade that will be assigned by the course instructor. Because we believe the review process is a vital component of the growth and development of our students, we recommend that you discuss your responses with the student using one of the following procedures: (1) You may have the student complete a copy of this form and compare responses with your completed form; (2) You may jointly complete the evaluation; or (3) You may complete the evaluation and then meet with the student to share your responses before returning it to us. When the form is completed, please return it to the following address or feel free to e-mail the form directly to scheidet@mtmary.edu:

Tammy H. Scheidegger, Ph.D., LPC, NCC
Practicum/Internship Coordinator, Counseling Program
Mount Mary University
2900 N. Menomonee River Parkway
Milwaukee, WI 53222-4597
414-930-3434