

# University Supervisor's Evaluation of Students in Counseling Internship

University of North Carolina at Greensboro  
Department of Counseling and Educational Development

**Intern:**

Please complete the following box before submitting this form to your host supervisor for completion.

Student's Name: \_\_\_\_\_ Date: \_\_\_\_\_

Experience Being Rated: (Please check the appropriate boxes)

- |                                   |                                   |                                   |                                   |
|-----------------------------------|-----------------------------------|-----------------------------------|-----------------------------------|
| <input type="checkbox"/> CED 680A | <input type="checkbox"/> CED 680B | <input type="checkbox"/> CED 780A | <input type="checkbox"/> CED 780B |
| <input type="checkbox"/> CED 680C | <input type="checkbox"/> CED 680D | <input type="checkbox"/> CED 780C | <input type="checkbox"/> CED 780D |

- Mid semester evaluation                       Final evaluation

Number of Supervision Sessions with University Supervisor: \_\_\_\_\_

Total Internship Hours Completed to Date: \_\_\_\_\_

University Supervisor: \_\_\_\_\_

Internship Site: \_\_\_\_\_

**University Supervisor**

Please rate the student according to the following scale based on the student's current level of professional development:

Poor (1)    Inconsistent (2)    Average (3)    Strong (4)    Excellent (5)

Please be as objective as possible in your ratings. This evaluation is meant to be used for the professional development of our internship students, and so the responses should be honest to provide instructive and constructive feedback. After you have completed this form, please share your responses and rationale for your responses with the intern. Once it has been completed, and shared with the internship student, please give it to Melinda Ryan to place in the student's fieldwork folder.

**PROFESSIONAL CHARACTERISTICS**

	POOR	INCONSISTENT	AVERAGE	STRONG	EXCELLENT
On time to supervision	1	2	3	4	5
Preparation for supervision	1	2	3	4	5

	<b>POOR</b>	<b>INCONSISTENT</b>	<b>AVERAGE</b>	<b>STRONG</b>	<b>EXCELLENT</b>
Preparation for counseling sessions	1	2	3	4	5
Ethical behavior	1	2	3	4	5
Responsible	1	2	3	4	5
Receptive to feedback	1	2	3	4	5
Utilizes feedback	1	2	3	4	5
Appropriately independent	1	2	3	4	5
Uses supervision appropriately	1	2	3	4	5
Interacts appropriately with clients	1	2	3	4	5
Interacts appropriately and professionally with staff at site	1	2	3	4	5
Interacts appropriately with peers in group supervision	1	2	3	4	5

PERSONAL CHARACTERISTICS

	<b>POOR</b>	<b>INCONSISTENT</b>	<b>AVERAGE</b>	<b>STRONG</b>	<b>EXCELLENT</b>
Sense of self-confidence	1	2	3	4	5
Self-awareness	1	2	3	4	5
Willingness to learn	1	2	3	4	5
Emotional stability	1	2	3	4	5
Adaptability	1	2	3	4	5

COUNSELING SKILLS AND PROCESS

	<b>POOR</b>	<b>INCONSISTENT</b>	<b>AVERAGE</b>	<b>STRONG</b>	<b>EXCELLENT</b>
Ability to understand client's point of view	1	2	3	4	5

	<b>POOR</b>	<b>INCONSISTENT</b>	<b>AVERAGE</b>	<b>STRONG</b>	<b>EXCELLENT</b>
Ability to relate to diverse clients	1	2	3	4	5
Ability to establish and maintain rapport	1	2	3	4	5
Ability to maintain confidentiality	1	2	3	4	5
Ability to assess client's needs	1	2	3	4	5
Ability to use basic helping skills	1	2	3	4	5
Ability to conceptualize clients' problems/case	1	2	3	4	5
Ability to remain objective in counseling session	1	2	3	4	5
Willingness to seek consultation and supervision	1	2	3	4	5
Ability to conduct ongoing (2+) sessions with clients	1	2	3	4	5
Ability to respond to a variety of client emotions	1	2	3	4	5
Process skills (e.g., pacing, dealing with client resistance)	1	2	3	4	5
Can read and interpret client nonverbal behavior	1	2	3	4	5
Ability to remain flexible and use variety of approaches in counseling session	1	2	3	4	5
Ability to complete holistic assessment of client (e.g., culture, stressors, strengths)	1	2	3	4	5
Appropriately chooses techniques/interventions	1	2	3	4	5
Ability to prepare and present case presentation	1	2	3	4	5

ADDITIONAL SKILLS (Rate only those that are applicable for this site and this intern)

	<b>POOR</b>	<b>INCONSI- STENT</b>	<b>AVG</b>	<b>STRONG</b>	<b>EXCELLENT</b>	<b>NOT APPLICABLE</b>
Ability to prepare a comprehensive case study	1	2	3	4	5	NOT APPLICABLE
Knowledge of tests/appraisal and their interpretation	1	2	3	4	5	NOT APPLICABLE
Diagnostic skills	1	2	3	4	5	NOT APPLICABLE
Treatment planning implementation	1	2	3	4	5	NOT APPLICABLE
Ability to manage transference/ countertransference	1	2	3	4	5	NOT APPLICABLE
Ability to work with families or family units	1	2	3	4	5	NOT APPLICABLE
Ability to counsel in a group setting	1	2	3	4	5	NOT APPLICABLE
Ability to critique self-appropriately	1	2	3	4	5	NOT APPLICABLE

OVERALL RATING OF STUDENT

	<b>POOR</b>	<b>INCONSI- STENT</b>	<b>AVG</b>	<b>STRONG</b>	<b>EXCELLENT</b>	<b>NOT APPLICABLE</b>
Counseling ability	1	2	3	4	5	NOT APPLICABLE
Coordination ability	1	2	3	4	5	NOT APPLICABLE
Consultation ability	1	2	3	4	5	NOT APPLICABLE
Potential for success in a similar setting	1	2	3	4	5	NOT APPLICABLE

Are there other issues for which this intern should be evaluated? If so, please comment on them in the space provided.

**Please comment on the following questions.**

What are the strengths of the student as an intern?

What areas need further development?

What recommendations would you make to enhance this student's development?

Please feel free to use the following space, or the back of this page, for any additional comments.

Student's Signature/Date: \_\_\_\_\_

University Supervisor's Signature/Date: \_\_\_\_\_

Printed Supervisor's Name: \_\_\_\_\_

*Note: The student's signature indicates that he/she has read the evaluation and has discussed it with his/her University supervisor. It does not necessarily indicate that he/she is in agreement with it. Significant disagreement on the part of the student regarding this assessment should be noted in writing and forwarded as an addendum to this form.*