



**Graduate Program in Counseling**

Mental Health Internship    School Counseling Practicum

**Student Evaluation of Placement Site**

Fall 20\_\_ / Spring 20 \_\_

Field Site \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_ Zip \_\_\_

**Field Site Supervising Practitioner**

- Educational Credentials \_\_\_\_\_
- Years of Experience \_\_\_\_\_ Years at Practicum/Internship Site \_\_\_\_\_

0	1	2	3	4	n/a
strongly disagree	somewhat disagree	neither disagree/agree	somewhat agree	strongly agree	Not applicable

My Field site supervising practitioner:

SCORE

- |  |                                |
|--|--------------------------------|
| 1. was an effective mentor.  | <input type="checkbox"/> _____ |
| 2. communicated expectations clearly.  | <input type="checkbox"/> _____ |
| 3. provided helpful and insightful feedback.   | <input type="checkbox"/> _____ |
| 4. offered appropriate counseling opportunities (individuals/groups/classrooms).     | <input type="checkbox"/> _____ |
| 5. provided opportunities to work with other field site staff/faculty.               | <input type="checkbox"/> _____ |
| 6. prepared me well for professional practice.                                       | <input type="checkbox"/> _____ |
| 7. encourage me to experience of new opportunities and expand my skills.             | <input type="checkbox"/> _____ |
| 8. taught me to manage counseling expectations at this practicum/internship site     | <input type="checkbox"/> _____ |
| 9. stays professionally current with issues and research in this field.              | <input type="checkbox"/> _____ |
| 10. I recommend this field site supervising practitioner to other graduate students. | <input type="checkbox"/> _____ |

**Field Site Accommodations**

<b>n/a</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
not available	poor	fair	average	good	excellent

- |   |                                |
|---|--------------------------------|
| 1. Work space (desk, office supplies, privacy for counseling) | <input type="checkbox"/> _____ |
| 2. Computer Access  | <input type="checkbox"/> _____ |
| 3. Confidentiality  | <input type="checkbox"/> _____ |
| 4. Safety   | <input type="checkbox"/> _____ |
| 5. I would recommend this field site to other students.       | <input type="checkbox"/> _____ |

**Please feel free to write any additional comments or information on the back. Thank you.**