

**STUDENT EVALUATION OF PRACTICUM**

*To be submitted to the Practicum Coordinator within 2 weeks of completing the practicum.*

**Which practicum placement was this?**

PWC Assessment (6631)     PWC Intervention (6632)     PWC Supervision (6633)  
 Advanced I (6634)     Advanced II (6635)

**A. GENERAL INFORMATION**

Name of Student: \_\_\_\_\_

Date: \_\_\_\_\_

Practicum Location: \_\_\_\_\_

Practicum Supervisor: \_\_\_\_\_

Dates of Practicum (state beginning and completion dates): \_\_\_\_\_

Total Number of Hours Completed for this Practicum: \_\_\_\_\_

**B. RECORD OF PRACTICUM EXPERIENCES**

*Instructions:* Please estimate the percentage of time in the practicum in which you engaged in the following professional activities (based on the total number of hours accumulated during the practicum).

	<u>Percentage of Practicum Time</u>
	(% must sum to 100)
1. Assessment (testing, interviewing)	_____
2. Individual Interventions	_____
3. Group Interventions	_____
4. Marital/family therapy	_____
5. Clinical seminars (presentations & attendance)	_____
6. Multidisciplinary meetings	_____
7. Supervision	_____
8. Case preparation (reading files, etc)	_____
9. Report writing	_____
10. Reading clinical literature	_____
11. Research	_____
12. Other (specify)	_____



**D. EVALUATION OF PRACTICUM SUPERVISOR**

*Instructions:* Please provide an evaluation of your practicum supervisor using the following scale. Use the rating categories to refer to the degree to which your supervisor’s style met your expectations. You should use your experience with previous supervisors as a basis for your comparison. *Note: This information is confidential. Only a summary of aggregate data will be used to provide feedback to supervisors.*

<b>Supervisor Characteristics</b>	<b>Inadequate</b>	<b>Adequate</b>	<b>Good</b>	<b>Excellent</b>	<b>Not Applicable</b>
Professional Approach					
Readily Accessible					
Provided Realistic Feedback					
Monitored Student Activities					
Kept Appointments					
Discussed Ethical Issues					
Clear Communication of Expectations					
Good Role Model					
Encouraged Student Autonomy					
Effective Use of Supervision Meetings					
Demonstrated Advanced Clinical Knowledge					
Skilled at Case Conceptualization					

*Remarks:* Please provide any additional information or explanation of the ratings you have made on your appraisal of your practicum supervisor (use additional sheets of paper if necessary).

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**E. GENERAL EVALUATION OF PRACTICUM**

Using the rating scale provided below, please indicate your overall evaluation of the practicum in terms of promoting your professional development and meeting your career goals.

1	2	3	4	5
Poor	Fair	Average	Good	Exceptional

What suggestions would you make that could improve the practicum and/or the supervisor's training approach?

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**F. RECOMMENDATIONS FOR FUTURE STUDENTS**

Please check the category below to indicate whether you would recommend this practicum to future clinical students.

- (a) \_\_\_\_\_ strongly recommend
- (b) \_\_\_\_\_ recommend
- (c) \_\_\_\_\_ would not recommend

Finally please comment on what background preparation a student should have to benefit most from this practicum setting.

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\_\_\_\_\_  
Signature of Student

\_\_\_\_\_  
Date