University of Wisconsin River Falls Counseling and School Psychology Department Internship Evaluation Form

The UWRF Counseling Program is grateful to you for your willingness to serve as a site supervisor. The final requirement for students is this formal evaluation. We encourage students to find a time to discuss the completed evaluation form with you, so that they can gain a clear understanding of their strengths and limitations as school counselors. If you have any questions, concerns or comments about the evaluation process, or your student(s), please contact Suelle Micallef Marmara (Suelle.Micallef Marmara @uwrf.edu) as soon as possible.

Name of Inter	rnship Stud	ent			
Name of Site	Supervisor	•			
School Name					
Internship Da	tes: Spring	or Fall (circle one) 20		
		Direc	t:	Indirect:	
NA	1	2	3	4	5
Not Applicable Im	Needs much provement	Needs some t improvement	beginning	Above adequate for beginning counselor	Exceptional
Section I-Co	unseling aı	nd Interpersonal	Skills		
Please use a 1 abilities:	number froi	m the above scale	that best correspo	onds with the student	t's
1. Basic Cour	nseling Skil	ls			
	•	sic reflections)			
2. Advanced	_				
(e.g., cognitiv	e/behavior	al and other proble	em-solving skills)		
3. Case Conce	eptualizatio	on			
(e.g., understa	ands, integr	rates, and utilizes the	heory, developme	ental models, and cli	ent(s)
4. Group Cou	nseling Ski	ills			
5. Interperson	al Skills w	ith students			
6. Interperson	al Skills w	ith parents, teacher	rs & staff		
7. Adheres to	Ethical Sta	andards			

Section II-Knowledge						
Please use a number from the scale on page one that best corresponds with the student's						
abilities:						
8. Counseling theories						
9. Counseling Process						
10. Policies and Procedures of Site						
11. Issues specific to clients served						
12. Understanding of counselor role and						
responsibilities						
13. Planning of appropriate classroom lessons						
14. Delivery of classroom counseling lessons						
Section III-School Counseling Content Guidelines Please use a number from the scale on page one that best corresponds with the student's abilities: 15. Demonstrates an understanding of the psychological and sociological foundations of human development, learning, and behavior.						
16. Demonstrates an ability to develop, organize, administer, evaluate, and promote a comprehensive school counseling program based on national standards and state developmental guidelines						
17. Demonstrates skills necessary to work with school teams in the promotion of a safe and healthy school climate (e.g. prevention and intervention strategies, conflict resolution, peer mediation, crisis management).						
18. Demonstrates an understanding of how diversity, inclusion, gender and equity impact academic achievement and personal-social and career development.						

19. Demonstrates individual and group counseling skills that facilitate students' personal/social, academic, and career development throughout their K-12 experience.
20. Demonstrates an understanding of PK-16 career development theories, practices and programs, including the ability to facilitate student skills development.
21. Demonstrates knowledge of developmental approaches to assist all students and parents at points of educational transition (e.g. elementary school to middle school)
22. Demonstrates an understanding of prescribed policies and procedures (e.g. state and federal laws, institutional rules, regulations and standards, national ethical codes)
23. Demonstrates an ability to utilize research, and assessments to improve the school counseling program so as to improve the learning environment of all students.
24. Demonstrates an understanding of how technology can be utilized to support students, families and educators in making informed academic, career and personal/social choices.
25. Demonstrates an understanding of how to acquire ongoing professional development

Please identify areas that you consider to be strengths of the student:						
Please identify areas that the student needs to continue to work on:						
I certify that I have completed this evaluation and discusse	I certify that I have completed this evaluation and discussed it with the student					
Site Supervisor Signature	Date	 e				
I have reviewed this evaluation with my site supervisor						
	rudent Signature Date	 e				