

SUPERVISOR EVALUATION

Counseling Psychology Program
Texas A&M Unveristy

Trainee: _____

Supervisor: _____

Dates of Supervision: _____ to _____

Date of Review: _____

DIRECTIONS: Below are several general areas of professional competencies, each with a set of specific skills or behaviors for evaluation

Strongly Disagree Disagree Neither agree/disagree Agree Strongly Agree
 1 -----2-----3-----4-----5

Using the above descriptors, provide a numeric rating for each skill or behavior listed that best reflects your observations of your primary supervisor. If you have not been able to observe or evaluate this skill, write "N/A."

FEEDBACK AND COMMUNICATION:	
<i>My Supervisor:</i>	<i>Observed Level:</i>
Provided sufficient and useful feedback about my strengths and successes.	
Provided sufficient and useful feedback about my weaknesses and mistakes.	
Used audiotapes/videotapes in a constructive manner.	
<i>Comments:</i>	
SELF-AWARENESS:	
<i>My Supervisor:</i>	<i>Observed Level:</i>
Raised awareness of my personal dynamics as related to therapy (e.g., transference, cultural issues, level of clinical development, etc.).	
Addressed and allowed adequate time for discussion of personal/interpersonal issues when relevant to clinical work.	
Improved understanding of my own therapeutic style.	
<i>Comments:</i>	

TREATMENT:	
<i>My Supervisor:</i>	<i>Observed Level:</i>
Helped me to broaden and develop my abilities in treatment intervention.	
Helped to define and establish appropriate treatment goals.	
Provided useful guidance and support in crisis intervention.	
<i>Comments:</i>	
CASE CONCEPTUALIZATION:	
<i>My Supervisor:</i>	<i>Observed Level:</i>
Was helpful in case conceptualization.	
Provided insight into client dynamics.	
Assisted in diagnosis and assessment	
<i>Comments:</i>	
MULTICULTURAL ISSUES:	
<i>My Supervisor:</i>	<i>Observed Level:</i>
Explored multicultural issues involving clients.	
Explored multicultural issues involving me as a therapist and individual.	
Demonstrated awareness and respect for issues of diversity in supervision.	
<i>Comments:</i>	
ATMOSPHERE/RELATIONSHIP:	
<i>My Supervisor:</i>	<i>Observed Level:</i>
Created a setting in which I felt free and comfortable to explore my mistakes and weaker areas.	
Showed empathy, respect, and concern for me.	
Demonstrated concern about my goals and objectives and how to meet them.	
<i>Comments:</i>	

OPENNESS:	
<i>My Supervisor:</i>	<i>Observed Level:</i>
Was receptive and sensitive to my ideas and opinions, even if different from his/her own.	
Exhibited openness to feedback and suggestions about supervision.	
Respected personal and individual differences between trainee and supervisor.	
<i>Comments:</i>	
PROFESSIONAL RESPONSIBILITY:	
<i>My Supervisor:</i>	<i>Observed Level:</i>
Provided weekly supervision that was timely and uninterrupted.	
Was available for consultation outside of supervision.	
Provided meaningful feedback on written communication.	
Provided sufficient guidance in meeting other training requirements, e.g., fulfilling testing requirements, running a group, setting up an intern project, establishing a rotation (if applicable).	
Understood or helped me to clarify my issues as a developing clinician.	
Supported my growth and autonomy in identified areas.	
Served as a mentor in guiding and supporting my clinical and professional development.	
<i>Comments:</i>	

Describe an incident that had a great deal of positive impact on you.

Describe an incident where you wish your supervisor could have been more helpful.

What are your supervisor's strengths?

How might your supervisor improve?

My signature indicates that I have read the evaluation and its contents were discussed with the practicum student.

Trainee's Signature Date

Supervisor's Signature Date

**CC: Training Director
Supervisor
Trainee**