



SITE EVALUATION

(Due after completion of 600 hours)

Name of Counselor Trainee: _____

Name of Site Supervisor: _____

Dates of Placement: _____ to _____

Name of Site: _____

Rate the following questions about your site and experiences using the following scale:

A = Very satisfactory

B = Moderately Satisfactory

C = Moderately unsatisfactory

D = Very unsatisfactory

1. _____ Amount of on-site supervision
2. _____ Quality and usefulness of on-site supervision
3. _____ Relevance of experience to career goals
4. _____ Exposure to information about community resources
5. _____ Rate all applicable experiences that you had at your site:
 - _____ Report writing
 - _____ Intake interviewing
 - _____ Administration and interpretation of tests
 - _____ Staff presentations/case conferences
 - _____ Individual counseling
 - _____ Group counseling
 - _____ Live supervision and/or video/audio recording of sessions
 - _____ Psychoeducational activities
 - _____ Consultation
 - _____ Career counseling
 - _____ Other
6. _____ Overall evaluation of the site

COMMENTS: Include on the back of this sheet any suggestions for improvements in the experiences you have rated moderately unsatisfactory or very unsatisfactory.