Placement Name \_\_\_\_\_\_\_\_\_\_\_ Supervisor: \_\_\_\_\_\_\_\_\_\_\_\_\_ Semester/year: \_\_\_\_\_\_\_\_\_\_ Clinical Ph.D. student? Y/ N

**Practicum Evaluation Form**

**End-Of-Semester Evaluation (updated 4/12/23)**

**Instructions:** Please complete the following for each practicum that you were involved in (separate form for each practicum). Recognizing that Likert-type scales rarely capture the full range of anyone’s experience, there also is a space at the end of these items for you to provide detail. Accordingly, please do use this space to elaborate on any or all of the below about which you think more could be said to clarify, illuminate, or instruct.

**PART I:**

 **Poor Fair Good Excellent N/A**

**Please rate the following:**

Pedagogy

1. Didactic seminars 1 2 3 4 N/A

2. Teaching of relevant techniques 1 2 3 4 N/A (conceptualization, assessment, therapy techniques, etc)

3. Readings 1 2 3 4 N/A

4. Overall quality of the course/practicum 1 2 3 4 N/A

Diversity/Identity

1. Discussion of identity & individual 1 2 3 4 N/A

 difference issues in supervision

2. Supervisor asks about marginalized identities 1 2 3 4 N/A

and dimensions of diversity (e.g., ethnicity, race,

religion, SES, sexual orientation) when discussing

case conceptualization/reviewing tapes/reports

3. When relevant, supervisor asks directly 1 2 3 4 N/A

about the impact of racism, racial stress/trauma

Supervisor

5. Feedback on reports, other

 clinical documentation (**timeliness**) 1 2 3 4 N/A

6. Feedback on reports, other

 clinical documentation (**quality**) 1 2 3 4 N/A

7. Non-specifics (support, openness) 1 2 3 4 N/A

8. Monitoring progress toward

 your clinical goals 1 2 3 4 N/A

9. Communication (expectations, directions, etc.) 1 2 3 4 N/A

10. Identified and communicated strengths,

 areas for improvement 1 2 3 4 N/A

Practicum Site

11. Would you recommend this practicum

 to another student? (for external practica only) 1 2 3 4 N/A

12. Would you recommend this supervisor

 to another student? 1 2 3 4 N/A

13. How would you rate the quantity of

 clinical hours at this site? 1 2 3 4 N/A

14. How would you rate the quality of

 clinical hours at this site? 1 2 3 4 N/A

15. To what extent was what you learned

 and hours gained a good time investment? 1 2 3 4 N/A

16. How would you rate the sociocultural

 diversity of this clinical population? 1 2 3 4 N/A

17. Overall quality of the experience 1 2 3 4 N/A

**Please use the space below to comment on any of the above aspects of the course:**

**PART II**

1. What about supervision was the MOST helpful to you in your clinical development?

2. What about supervision was the LEAST helpful to you in your clinical development?

3. What are some of your supervisor’s strengths?

4. What are some ways in which your supervisor might improve?

5. What suggestions do you have for modifying this practicum experience to facilitate clinical training of students?

6. What other topics/issues would you like to see covered in this experience? What other experiences?

7. Please comment below on any additional aspects of the course that you would like to: