Alabama A&M University **Speech-Language-Hearing Clinic**

SUPERVISOR EVALUATION (Off-Campus)

Supervisor's Name: Semester/Year							
This questionnaire has been prepared to give the student clinician an opportunity to provide feedback regarding the supervisory process. Only the student clinician and clerical staff will see this form. The supervisor will receive a typed summary which compiles the results from all raters. Any written comments will also be typed.							
Rating Scale:						1 = Po	or Applicable 3 = Average or 4 = Above Average blow Average 5 = Outstanding
Λ	1	2	3	1	5	1	Supervisor is available to assist extern students.
0	1	2 2	3	1	5	_	-
U	1	<i>_</i>	3	4	5	2.	Supervisor is punctual for scheduled conferences and appointments.
0	1	2	3	4	5	2	11
U	1	2	3	4	5	3.	Supervisor is sensitive to extern student's training and clinical background.
0	1	2	3	4	5	4.	
0	1	2 2	3	4	5	5.	
Ü	•	_	9	•	J	٥.	information, references, and handout materials.
0	1	2	3	4	5	6.	
U	1	_	3		5	0.	planning, and research.
0	1	2	3	4	5	7.	Supervisor encourages assertiveness from extern student, i.e.,
							freedom to ask questions.
0	1	2	3	4	5	8.	Supervisor provides positive specific suggestions for change in
							extern student's clinical performance.
0	1	2	3	4	5	9.	
0	1	2 2	3	4	5	10.	
							problems.
0	1	2	3	4	5	11.	<u> </u>
							clinical experience.
In my opinion, this supervisor's major area of strength is:							
In my opinion, the area in which this supervisor most needs to improve is:							
*** You may write additional comments below:							