

SYRACUSE UNIVERSITY
Counseling and Human Services

Internship Site Evaluation Form
COU 790

Please complete after your internship experience and submit to the university internship supervisor. This information is confidential in that it will not be shared with the site.

Site Name and District: _____

Student: _____ Semester/Year: _____

Host Supervisor: _____

Please make general comments as to the strengths and weaknesses of this site on the following areas:

General climate of the site:

Professional opportunities available at the site:

Supervision quantity and quality:

Please rate the site in the following areas:

- 1 = Poor
- 2 = Marginal
- 3 = Adequate
- 4 = Good
- 5 = Outstanding

| | Poor | | | Outstanding | | |
|---|------|---|---|-------------|---|-----|
| 1. Attitude of counseling staff toward having an SU intern: | 1 | 2 | 3 | 4 | 5 | N/A |
| 2. Attitude of administration toward having an SU intern: | 1 | 2 | 3 | 4 | 5 | N/A |
| 3. Attitude of teachers/staff toward having an SU intern: | 1 | 2 | 3 | 4 | 5 | N/A |
| 4. Attitude of students toward having an SU intern: | 1 | 2 | 3 | 4 | 5 | N/A |
| 5. Degree you felt that you were accepted as a valued member of the staff | 1 | 2 | 3 | 4 | 5 | N/A |
| 6. Degree that your comments/observations/ideas regarding Clients, program, etc. were solicited and/or valued | 1 | 2 | 3 | 4 | 5 | N/A |
| 7. Space availability for intern (private, etc.) | 1 | 2 | 3 | 4 | 5 | N/A |
| 8. Orientation to site and counseling department | 1 | 2 | 3 | 4 | 5 | N/A |
| 9. Availability of clients for individual/group counseling | 1 | 2 | 3 | 4 | 5 | N/A |
| 10. Attitude toward audio/video taping | 1 | 2 | 3 | 4 | 5 | N/A |
| 11. Availability of clients (guardians) willing to allow taping | 1 | 2 | 3 | 4 | 5 | N/A |
| 12. Opportunity for a variety of job related experiences | 1 | 2 | 3 | 4 | 5 | N/A |
| 13. Availability of site supervisor | 1 | 2 | 3 | 4 | 5 | N/A |
| 14. Availability of other support personnel | 1 | 2 | 3 | 4 | 5 | N/A |
| 15. Amount of time supervisor spent in observing and supervising me | 1 | 2 | 3 | 4 | 5 | N/A |
| 16. Ability of supervisor to communicate feedback to me | 1 | 2 | 3 | 4 | 5 | N/A |
| 17. Amount of feedback given to me about my performance | 1 | 2 | 3 | 4 | 5 | N/A |
| 18. Overall, my rating for this site | 1 | 2 | 3 | 4 | 5 | N/A |

Please use this space to expand on any of the above items:

Please indicate the level of effort that your site supervisor displayed in providing a quality internship experience (**please circle**) (e.g., provided referrals, invited participation in other job related duties, shared office space, facilitated problem-solving, etc.)

- 1 = Little effort (Intern carried responsibility to create opportunities)
- 2 = Marginal effort (Supervisor was helpful in some ways and not in others)
- 3 = Adequate effort (Supervisor was directive in suggestions for intern's activities)
- 4 = Good effort (Supervisor was active in working to facilitate a quality experience overall)
- 5 = Outstanding effort (Supervisor was active, helped the intern develop own problem solving, case conceptualization, and organization skills)

If the site were to be graded, what grade would you give?

___ A ___ B ___ C ___ D ___ F

In your opinion, what would make this a strong(er) site for our interns?

Please include any additional comments:

If you are willing to be contacted by future interns regarding this site, please list your email address.

THANK YOU FOR YOUR TIME!

07/10 SKP
Please submit form to Internship supervisor or CHS Secretary