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

## **SUPERVISOR EVALUATION (On-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:						0 = No $1 = Po$	bot Applicable $3 = Average$ for $4 = Above Average$
						2 = Be	elow Average $5 = $ Outstanding
		2				1.	Supervisor is available to assist student clinicians.
0	1	2	3	4	5	2.	Supervisor is punctual for scheduled conferences and appointments.
0	1	2	3	4	5	3.	Supervisor is sensitive to student clinician's training and clinical background.
0	1	2	3	4	5	4.	Supervisor sets reasonable goals for student clinician performance.
0	1	2	3	4	5	5.	Supervisor is willing to answer questions and provide helpful information, references, and handout materials.
0	1	2	3	4	5	6.	Supervisor encourages independent thinking, decision making, planning, and research.
0	1	2	3	4	5	7.	Supervisor encourages assertiveness from student clinicians, i.e., freedom to ask questions.
0	1	2	3	4	5	8.	
0	1	2 2	3	4	5	9.	
			3	4	5	10.	Supervisor is sensitive to student clinician's personal feelings and problems.
0	1	2	3	4	5	11.	Supervisor is willing to mediate problems that arise during the 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: