

INTERNSHIP/PRACTICUM
PLACEMENT SITE EVALUATION

LIU POST/LIU BRENTWOOD
DEPARTMENT OF COUNSELING AND DEVELOPMENT

Professor's Name: _____

Course # _____ Semester _____ Year _____

Name of Facility _____

Phone _____

Address _____

Director of Facility _____

Supervisor's Name _____

Type of Facility _____

Student's Name _____

RATE THE PROCEDURES IN THE FOLLOWING AREAS:

	Very poor	Poor	Adequate	Good	Outstanding
Appropriateness of initial service duties	1	2	3	4	5
Availability and quality of individual counseling opportunities	1	2	3	4	5
Availability and quality of group counseling opportunities	1	2	3	4	5
Availability of regular, weekly supervision – individual	1	2	3	4	5
Availability of supervision for special issues	1	2	3	4	5
Quality of supervision	1	2	3	4	5

Do you recommend that the Department continue using this agency/school as a field placement?
 YES _____ NO _____ WHY OR WHY NOT? _____

What should the student be told before contacting and/or selecting this as a field site? _____

Additional Comments: Re – Placement Process; Other; Feedback
