

**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

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