## SCHOOL PSYCHOLOGY PROGRAM California University of Pennsylvania Evaluation and Verification of Internship Form

Supervisors, please use this form to evaluate and verify the professional experiences of your intern(s). Formal evaluations should occur on a quarterly basis with the completed evaluation form being returned to the University Internship Supervisor.

Using the following scale please evaluate the Intern's demonstrated progress/competency in each of the areas listed below. In the comment sections you may elaborate on the intern's performance within the area and/or make recommendations for future development. Please provide constructive comments for areas found to be in need of improvement. If more space is required for your comments, please write them on a separate sheet of paper and attach it to this form.

OUTSTANDING = $3$	ABOVE AVERAGE	= 2	SATISFACTORY = $1$	UNSATISFACTORY = $0$
INTERN:			INTERNSHIP SITE:	

Area 1 - Role and Function of a School Psychologist - knowledge and performance of the various roles of a school psychologist including alternative models of practice

<u>Basic Roles</u>: Assessment – Consultation – Intervention - Professional School Psychology – Research <u>Alternative Roles</u> (e.g., Program Evaluation – Crisis Intervention – Preschool – Vocational – Community Agency)

Comments

Plans

Rating

## Area 2 - Organization and Operation of Schools - knowledge of school systems including

8 1	e	5 6
Regular Education programs	Special Education programs	Administrative Polices
Power Structure	Discipline policy	School Activities
Community resources	Communication network	Personnel
Home-school collaboration	Other	

Comments

Plans

Rating\_\_\_\_\_

Area 3 - Assessment - formal and informal asses	essment procedures including:	
Appropriate test selection		
Accuracy of scoring	Accurate and meaningful synthesis of data	
Interpretation for remedial planning	Behavioral assessment	
Curriculum-based assessment	Other	

Comments

Plans

1

Rating

		n and implement	ntation of intervention strategies for b	ehavioral or
academic prob	assessment linked	h	ehaviorally stated	
	pertinent/meaningful	U(	esearch-based	
	logically organized		enerates and chooses appropriate solution	
			11 1 1	
	Other			
Comments				
DI				
Plans				Dating
				Rating
Area 5 - Coun	seling - individual or group t	echniques utili <sup>,</sup>	zed to increase self-awareness and/or	to improve social
	ustment that encompass the f		Let to moreuse sen awareness and/or	
			generates and chooses appropriate s	olutions
			pertinent/meaningful plans	
researc	h-based		implements and follows-up on plan	of action
		ons	friendly, professional demeanor	
Other _				
Comments				
Comments				
Plans				
				Rating
				<i>U</i>
Area 6 - Cons	ultation/Communication Sk	cills - effective	oral and/or written communication sk	ills including
		Oral Written	n	Oral Written
			content appropriate	
	eness		meaningfulness	
objectiv	vity with diverse populations		friendly, professional demeanor	
willing	to work with others		research-based	
logical	ly organized		Other	·
Comments				
comments				
Plans				
				Rating
				0
Area 7 - Resea	rch - utilizes, conducts, and/	or reviews rese	earch for effective service delivery	
	lly evaluates professional resea		Applies current research in problem sol	ving
	cally reviews professional liter		Adheres to the scientific method in prol	olem solving
Operati	ionally defines problems		Other	
Commente				
Comments				

Rating\_

Plans

Area 8	<b>B - Legal/Ethical</b> - knowledge a State education laws & regulat NASP ethical guidelines		Federal education	tion laws & reg		
Comm	ents					
Plans					Rating	
Area 9	<b>- Professionalism</b> - demonstrative objectivity with diverse populative willing to work with others accepts/responds to supervision	ons	friendly, pro responds in	fessional demea timely fashion to		
Comm	ents					
Plans						
					Rating	
Comm	Other					
Plans					Rating	
Other	Trainee Issues				Kating	
Please	check the appropriate quarter:	Date	Comp	osite Rating	Clock Hours Compl	eted
	Quarter 1					
	Quarter 2					
	Quarter 3					
	Quarter 4					
	Final Overall Rating					
Summa	ary of Hours:					
	School Ho	ours	Clinic Hours	Total	Hours	

Signature of Intern\_\_\_\_\_

Signature of Field Supervisor\_\_\_\_\_

Signature of University Supervisor\_\_\_\_\_