

**Practicum Quarterly Professional Behavior Evaluation Form
University of Oregon School Psychology Program**

Student Name: _____ **Date Completed:** _____ **Quarter** Fall Winter Spring

Supervisor Completing Form: _____ **Supervision:** School-based *or* University-Based

Site Placement: _____

Directions for Completing this Form: Ratings of students should be made in consideration of the student’s current level of training and experience. This is an individual referenced criterion measure. Please evaluate the student’s performance on each item independently. Supervisors are encouraged to write comments on each criterion. ***Each rating of 1 or 2 must be accompanied by an explanation.*** In some cases, it may not be possible to rate an item if the student has not had the opportunity to demonstrate the behavior. If so, please make a note in the space provided.. Indicate strong points and areas needed for improvement in relation to each criteria in the space provided or on additional sheets as necessary.

Evaluate Student’s Behavior According to the Following Dimensions:

- **4** *Exceptional:* Student demonstrates skills beyond what would be expected by a student at his/her level of training.
- **3** *Satisfactory:* Student displays competent and proficient behaviors.
- **2** *Needs Improvement:* Student displays some behaviors successfully but is not proficient.
- **1** *Unsatisfactory:* Student does not display the required behaviors to the degree necessary for successful performance.

Knowledge of Skills Related to the Role and Function of a School Psychologist

1. Knowledge and adherence to procedures and policies.	1	2	3	4
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2. Knowledge of assessment related issues (e.g. standardization, reporting, etc.).	1	2	3	4
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3. Student’s attention to detail and accuracy.	1	2	3	4
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4. Student’s timeliness of task completion and time management skills.	1	2	3	4
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5. Student thoroughly completes tasks.	1	2	3	4
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6. Knowledge and utilization of outside resources.	1	2	3	4
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7. Knowledge of school-related issues (e.g. mental health issues, behavioral difficulties, etc.)	1	2	3	4
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8. Knowledge and skills related to problem-solving, consultation, and intervention.	1	2	3	4
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**** Each rating of 1 or 2 must be accompanied by an explanation ****

Professional & Interpersonal Behavior

1. Adheres to ethical standards (e.g. confidentiality, record keeping, etc.)	1	2	3	4
2. Skills relating to other educational professionals.	1	2	3	4
3. Skills in presenting and explaining information/data to parents and educational professionals.	1	2	3	4
4. Reaction to feedback from supervisor or other educators.	1	2	3	4
5. Works constructively and contributes to group activities (e.g. IEP/SST meetings, etc.)	1	2	3	4
6. Ability to assume a leadership role or work independently..	1	2	3	4
7. Seeks additional assistance/clarification when necessary.	1	2	3	4
8. Accepts responsibility for actions.	1	2	3	4
9. Takes initiative for actions when appropriate.	1	2	3	4
10. Establishes rapport with children and families.	1	2	3	4

Overall Rating: When considering all of the presented performance evaluation criteria *and* the student's current level of training and experience, the overall rating of this student is **1 2 3 4**

The student's greatest strength's are the following: _____

Areas to target for further development: _____

School-Based Supervisor Signature: _____ Date: _____

Student Signature: _____ Date: _____

University-Based Supervisor Signature: _____ Date: _____

University Advisor Signature: _____ Date: _____

Please include any additional comments regarding the student's experiences and skills not covered by this form on a separate sheet of paper.

**** Each rating of 1 or 2 must be accompanied by an explanation ****