Lehman College/CUNY SOCIAL WORK PROGRAM

<u> Undergraduate Mid-Term Fieldwork Evaluation – Fall Semester</u>

STUDENT'S NA	AME				
FIELD INSTRU	JCTOR'S NAM	IE		· · · · · · · · · · · · · · · · · · ·	
FIELD INSTRU	JCTOR'S Phor	ne #			
FIELD INSTRU	JCTOR'S Ema	il Address			
AGENCY					
UNIT/DEPART	ГМЕПТ				
ADDRESS OF	AGENCY				
following area	as using the f	ollowing s	cale: Abo	rformance in the ve Satisfactory et Determined (("AS"),
I. <u>Direct Servi</u>	ces to Clients	<u> </u>			
Beginning Skills In:	Individuals	Families	Groups	Organizations	Communities
Engagement					
Assessment					
Contracting					
Interviewing					
Comments:		L	L		

II. <u>4</u>	Agency as Service Delivery System Beginning to understand agency function			
В.	Beginning to use Community resources			
C.	Beginning to fulfill administrative responsibilities in a timely manner			
D	. Beginning to show/develop capacity to collaborate with agency staff			
III.	Supervisory Process			
A.	Regular attendance at scheduled weekly supervisory meetings			
В	Preparation of agenda			
C.	Identifying learning needs/problems			
D	. Developing self-awareness			
E.	Accepting constructive criticism			
F.	Use of Process recordings: a. Does the student submit process recordings in time for use in the			
	weekly supervisory conference? Yes No			
	b. Is the student beginning to reflect upon his/her interventions and role			
	in the process recordings? Yes No			
IV. <u> </u>	Professional Issues			
A. Responsiveness to agency polices and regulations				
B. Use of time, punctuality, and attendance				
C. Maintaining current records, compiling statistical data, performing other				
	routine tasks			
D	D. Adherence to professional values and ethics (NASW Code of Ethics); for example: confidentiality, client self-determination, non-judgmental approach. (Note: Breeches of professional values and ethics should be brought to the attention of the faculty advisor when they happen)			

Comme	nts: _		
V.	A.	Please indicate any other sign	ficant strengths:
	В.	Please indicate any other signi	ficant areas of concern:
Field In	nstru	ıctor's Signature	Date
Student's Signature			Date
(Note: S	Stude	nt's signature indicates that the	e student has read this evaluation.

(Note: Student's signature indicates that the student has read this evaluation. It does not indicate the student's agreement with the evaluation. The student may write and attach an addendum to this evaluation.)