Clinical Placement Training Evaluation Form  
Graduate Training Program in Clinical Psychology, Case Western Reserve University

Trainee Name:  
Semester/Dates of Training:  
Placement Site:  
Supervisor Name:  
Supervisor E-mail:  
Supervisor Phone:  

Type of Placement:  
- Assessment  
- Intervention  
- Research  
- Consultation  
- Umbrella supervision (student doing the supervision)  
- Other (Please specify):  

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<tr>
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<td>somewhat below expected level</td>
<td>at expected level (competent)</td>
<td>somewhat above expected level</td>
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**CLINICAL/INTERVENTION SKILLS**

- Interviewing skills
- Rapport building
- Empathy & interpersonal skills
- Appropriate boundaries
- Knowledge of area (strategies (for intervention; research)
- Sensitivity to diversity issues
- Case conceptualization
- Treatment planning
- Treatment implementation
- Assessing progress and modifying treatment as needed
- Writing skills (notes, summaries)

**OVERALL RATING:**

Comments:

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**ASSESSMENT SKILLS**

- Knowledge & selection of tools
- Test administration & scoring
- Interpretation of test data
- Report writing
- Giving feedback

**OVERALL RATING:**

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**PROFESSIONALISM**

- Ethics (knowledge & behavior)
- Emotional stability & maturity
- Responsibility
- Time management
- Professional appearance & attire
- Attention to detail
- Cooperation (with peers, other professionals or agencies)
- Openness to learning

**OVERALL RATING:**

Comments:

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**RESPONSE TO SUPERVISION**

- Use of supervision time
- Communication with supervisor
- Responsiveness to feedback

**OVERALL RATING:**

Comments:

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Trainee’s main strengths and assets:

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Trainee’s main areas for improvement:

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Additional comments:

**Student has been directly (i.e., in person or with video) observed at least once.**

Brief Comments:

Supervisor’s signature: _____________________________ Date: _________________

Trainee’s signature: _____________________________ Date: _________________