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PRACTICUM SITE EVALUATION FORM

• Student is responsible for submitting the completed form to the practicum coordinator by **deadline**: <u>no later</u> <u>than the last day of the term. Late submissions may compromise your course grade.</u>

If you have any additional questions please contact the practicum coordinator, see contact information above.

	Term & Year Term & Year Term & Year		Pro	gram/Department DCRS (MS or Ph.D.) MACS/DCRS CSA/DMS NSA/DMS				
Please print or type.								
Date Submitted to Practicum Coordinator:								
Student Name:		_N#		_				
NSU E-mail:								
Address:								
Work Phone:	Home Phone:		-					
Mobile:								
Practicum Professor:								
Practicum Site:								
Site Supervisor:		Title						
Telephone:	Fax:	Email:						
Site Address:		Website:						
Supervisor's Email:								
For office use only: Received				on the following questions as aposifically				

In order to continually improve the practicum experience, please take a moment to answer the following questions as specifically and succinctly as possible.

1. Briefly describe what you were responsible for accomplishing at the practicum site:

2. Describe the benefits you gained from this practicum:

3. Explain if there is anything about the site or the activities at the site that you think can be improved.

4. Describe if and how you achieved your learning contract goals.

- 5. Describe how your supervisor was available and helpful to you.
- 6. Please explain whether or not you would recommend this supervisor for future practicum placements.

Part II

Indicate the number that best corresponds to your thoughts on the following statements.

a. This practicum experience helped me learn to apply what I have learned in the program.

Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
1	2	3	4	5

b. The practicum site supervisor helped me achieve my learning contract goals.

Strongly Disagree	Disagree	Neutral A	gree	Strongly Agree	е			
1	2	3	4	5				
c. This practicum site was an adequate organization for achieving my learning goals.								
Strongly Disagree	Disagree	Neither Agree nor Di	sagree	Agree	Strongly Agree			
1	2	3		4	5			

Additional Comments/Suggestions:

Print Student Name: _____

Student Signature: _____ Date: _____