



Onsite Supervisor Evaluation Form

Practicum for Master of Arts in Higher Education Program

Please complete this evaluation form and submit to the MAHE Program Director at scarlett.ponton@colorado.edu. This form is due by Reading Day of each semester (the Friday between the last day of classes and the first day of finals).

This is a required component of the practicum course credit. Please also have an in-person discussion with student.

Student Name: _____ ID: _____
Supervisor Name: _____ Supervisor Title: _____
Supervisor Email: _____ Department: _____
Semester of Practicum: _____ Credit Hours: _____
Dates of Practicum: _____

Please list three to five goals or learning outcomes discussed with the student and documented on the "Student Request for Practica and Learning Contract" form. Evaluate the student's progress toward completion of each goal, and also provide comments.

Goal 1

Evaluation

Exceeded Expectations
Met Expectations
Did Not Meet Expectations

Comments



Goal 2

Evaluation

Exceeded Expectations

Met Expectations

Did Not Meet Expectations

Comments

Goal 3

Evaluation

Exceeded Expectations

Met Expectations

Did Not Meet Expectations

Comments



Goal 4

Evaluation

Exceeded Expectations
Met Expectations
Did Not Meet Expectations

Comments

Goal 5

Evaluation

Exceeded Expectations
Met Expectations
Did Not Meet Expectations

Comments