Theological Field Education

Supervisor/Mentor Final Evaluation

Name of Student: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Report date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of mentor/supervisor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of congregation/organization/site: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*The following questions and categories are a guide for your evaluation of the student. Please provide a completed copy of this evaluation to the student for discussion during a final reflection session. You should also receive a self-evaluation document from the student. If you disagree with any part of the student self-evaluation, the student is to note the disagreement in her/his/their report and provide a plan for resolution. Your signature on the student’s report and this report will indicate that you have read these reports and that you agree with them. You can insert your responses in the sections below and transmit the document (once you have met to review it with the student) to:* *mnichol@vst.edu**.* ***Due dates are listed in the Theological Field Education Handbook.***

Thank you for your participation in Theological Field Education at VST.

Rev. Mary Nichol

Director – Theological Field Education

1. **RELATIONSHIP**: Describe the student’s relationship to the congregation/agency setting. What do you observe in terms of the student’s relationships with others in the placement site?

2. **GROWTH AREAS**: What would you say are the student’s strengths and growth areas in this placement? Have you observed the student experiencing limits, disappointments, failures? What would you consider to be the areas of growth for this student going forward? What areas of learning would you recommend?

3. **LEARNING GOALS**: Describe the progress made on the student’s learning goals.

4. **THEOLOGICAL REFLECTION**: Describe the nature of the reflection sessions with the student. Is the student demonstrating a capacity for personal reflection? Did the student make good use of your feedback? What have been some of your reflections, with the student, during this experiential learning time?

5. **OTHER COMMENTS**:

6. **SIGNATURES**: Student: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Supervisor/Mentor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_