Mid-Unit Evaluation

Name of student: ____________________________

School (if cross registered): ______________________

Name of setting: ______________________________

Name of supervisor: ____________________________

*Both supervisor and student must sign and date the evaluation.*

Both the supervisor and the student should respond to the questions below, producing one evaluation, or two separate evaluations which are shared and countersigned. Please *include concrete examples* in support of your statements.

1. At this mid point in your program, where do you find the greatest sense of accomplishment and satisfaction? Respond to this question bearing in mind the goals and objectives of the learning agreement.
2. Where have you come upon the greatest challenges and difficulties in accomplishing the tasks of the program and in your theological reflections?
3. Comment on the relationship between the student and the supervisor or supervisory group. Have these relationships and meetings been timely, clear, open and useful?
4. Comment on the meetings with the on-site reflection group. In what ways has this group been helpful?
5. Have you made any decisions to change your plans or re-negotiate your contract? If so, please discuss this.
6. Do you need any additional support from the Office of Theological Education, the Director, the Contextual Education Committee or others?
7. Do you have any additional comments?

Please date and sign your evaluation.