

University at Albany  
**Community and Public Service Program**  
**SUPERVISOR EVALUATION FORM**

**PLEASE RETURN TO:**  
 Community and Public Service Program  
 University at Albany  
 1400 Washington Ave., Social Sciences 112  
 Albany, NY 12222  
 Phone: 518-442-5683 Fax: 518-442-5684

**Student's Name:** \_\_\_\_\_

**RSSW 290**                       **RSSW 291**     **RSSW 390**  
**FALL 20** \_\_\_\_\_      **SPRING 20** \_\_\_\_\_      **SUMMER 20** \_\_\_\_\_

**Organization:** \_\_\_\_\_

**Your Name:** \_\_\_\_\_

**E-mail or phone number:** \_\_\_\_\_

**A total of** \_\_\_\_\_ **volunteer hours have been completed by this student as of (date):** \_\_\_\_\_

**Total number of sit down, face-to-face supervision hours for the semester:** \_\_\_\_\_

**Please provide a brief description of the projects and responsibilities with which the student has been involved:**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Please evaluate the student's performance in the following areas by marking the appropriate rating:**

<b>1-Strongly Disagree 2-Disagree 3-Neutral 4-Agree 5-Strongly Agree, N/A-Don't Know</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>	<b>N/A DK</b>
Student understood his/her volunteer role/job functions:						
Student understood our organization's mission and how it effects the work that we do						
Student was an asset to our organization						
Student was reliable in performing her/his duties as assigned						
Student was sensitive to the diversity of her/his colleagues and constituents						
Student's work benefited our constituents and/or furthered our mission						
Student used supervision to develop professional skills and resolve questions						
Student gained professional skills through the volunteer experience						
Other:						

**Please evaluate your experiences with CPSP**

<b>1-Strongly Disagree 2-Disagree 3-Neutral 4-Agree 5-Strongly Agree, N/A-Don't Know</b>	1	2	3	4	5	N/A DK
The amount of time required to supervise student, including completing required documentation was reasonable						
Organization staff appreciated the additional program resources provided by the CPSP student						
We would like to continue to have CPSP volunteers at our organization						
Organization staff would like to increase the number of CPSP student volunteer presence in our organization						
The expectation of our role as an organizational partner is clear.						
CPSP staff are available to answer our questions and meet our needs						
The overall system in place for the partnership between our organization and the CPSP program works effectively.						

**Please use this space to share any comments regarding the above dimensions or to add any additional feedback regarding the student's performance:**

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**Please comment regarding your satisfaction with the Community and Public Service Program, including any suggestions for improvement:**

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Supervisor

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Date