

**Department of Tourism, Recreation and Sport Management  
University of Florida**

**PRACTICUM SUPERVISOR'S MIDTERM EVALUATION FORM**

**Name of Supervisor:** \_\_\_\_\_

**Agency:** \_\_\_\_\_

**Mailing Address** \_\_\_\_\_

**Phone and Email:** (\_\_\_\_) \_\_\_\_\_ and \_\_\_\_\_@\_\_\_\_\_

**Student Intern:** \_\_\_\_\_

**Date Completed:** \_\_\_\_\_

Please check the appropriate box. Feel free to comments and/or provide specifics.

<b>CRITERIA</b>	<b>Excellent</b>	<b>Good</b>	<b>Fair</b>	<b>Unsatisfactory</b>
<b>1. Attendance</b>				
<i>Comment:</i>				
<b>2. Punctuality</b>				
<i>Comment:</i>				
<b>3. Dependability/reliability</b>				
<i>Comment:</i>				
<b>4. Cooperation with supervisor</b>				
<i>Comment:</i>				
<b>5. Cooperation with staff</b>				
<i>Comment:</i>				
<b>6. Taking direction</b>				
<i>Comment:</i>				
<b>7. Asking for help appropriately</b>				
<i>Comment:</i>				
<b>8. Professional appearance</b>				
<i>Comment:</i>				
<b>9. Quality of independent work</b>				
<i>Comment:</i>				
<b>10. Quality of team work</b>				
<i>Comment:</i>				
<b>11. Acceptance of responsibility</b>				
<i>Comment:</i>				
<b>12. Organizational skills</b>				
<i>Comment:</i>				
<b>13. Time management skills</b>				
<i>Comment:</i>				
<b>14. Follow-through skills</b>				
<i>Comment:</i>				
<b>15. Imagination/creativity</b>				
<i>Comment:</i>				
<b>16. Enthusiasm/motivation</b>				
<i>Comment:</i>				
<b>17. Professional conduct/demeanor</b>				
<i>Comment:</i>				
<b>20. Trainee's potential as a professional</b>				
<i>Comment:</i>				

**(OVER)**

How frequently did you observe the student? \_\_\_\_\_

1. When and where did you meet and discuss this evaluation?

\_\_\_\_\_  
\_\_\_\_\_

2. How did the student respond to your ratings and comments?

\_\_\_\_\_  
\_\_\_\_\_

3. What were the student's major tasks during this period?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. What skills did the student demonstrate that show mastery of critical skills needed in the planning and delivery of program and events in your agency?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5. In terms of specific skills, areas for improvement include:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

6. Other comments/reactions:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Based upon my evaluation, this student is progressing to earn a Satisfactory or Unsatisfactory grade. (please circle your response)

Evaluator Signature: \_\_\_\_\_

Please print name: \_\_\_\_\_

Please mail/fax this form to: Doug DeMichele, Ed. D.  
Department of Tourism, Recreation and Sport  
Management  
University of Florida  
PO Box 118208  
Gainesville, FL 32611-8208 Fax: 352-392-7588

Or scan and email to DeMiche@hhp.ufl.edu