Mid-term Evaluation Form
Internship, Practicum, & Field Experience
Higher Education Administration & Student Personnel
HIED 6/76492

Graduate Practicum Student _____

On-site Supervisor _____

Please select the response that most accurately corresponds with the above named Graduate Practicum Student's rate of progress toward the goals of his or her Practicum Plan.

Poor		Satisfactory		Outstanding
○	○	○	○	○
1	2	3	4	5

Comments (please base comments on criteria listed on page 10 of the Practicum Manual):

_____ _____

On-site Supervisor's signature **Date**
(if submitting digitally, enter Kent State email)

_____

Title

Mid-term Evaluations are due once the student has completed 75 clocked hours.

In order to submit the completed form, please save it to your computer for your own records, and attach it to an email to your internship supervisor.