

THE UNIVERSITY OF NORTH CAROLINA AT CHAPEL HILL  
DIVISION OF OCCUPATIONAL SCIENCE

SUPERVISOR REPORT OF FIELDWORK I

**INSTRUCTIONS:**

The FW I supervisor completes this form and reviews it with the student. The student returns it to Sue Coppola, UNC-CH Fieldwork Coordinator. Otherwise it can be faxed to 919-966-9007.

Student's Name: \_\_\_\_\_ Dates of FW I: \_\_\_\_\_

Site Name: \_\_\_\_\_ Supervisor: \_\_\_\_\_

1. What are the strengths did you observe in the student?

2. Please indicate your impressions of the student by circling one number for each item.

	Poor-----	Average-----	Excellent
Appearance appropriate to setting:	1-----	2-----	3-----4-----5
Dependability and punctuality:	1-----	2-----	3-----4-----5
Communication:	1-----	2-----	3-----4-----5
Comfort in the setting:	1-----	2-----	3-----4-----5
Receptiveness to feedback:	1-----	2-----	3-----4-----5
Self-awareness:	1-----	2-----	3-----4-----5

Problems noted:

3. Recommendations for the student's future learning and professional growth:

4. Please comment on the assignment and arrangements for this FW I experience:

Supervisor signature: \_\_\_\_\_ date: \_\_\_\_\_

THANK YOU!