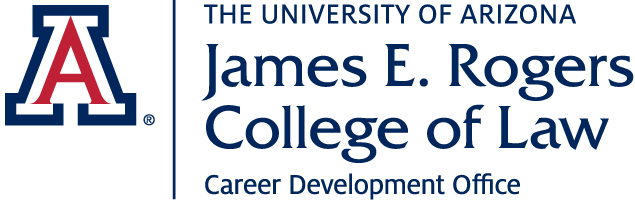
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EXTERNSHIP PROGRAM

Final Evaluation: Field Supervisor

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Student Name |  | | | | | |
| Placement Office |  | | | | | |
| Field Placement Supervisor completing evaluation: | |  | | | | |
| Field Supervisor Contact Information: | |  | | | | |
| Date/semester of externship: |  | | Total hours completed: |  | | |
| 1. Describe the types of legal tasks, assignments or other activities performed by the student at this placement: | | | | | | |
|  | | | | | | |
| 1. Did the student perform his/her assignments satisfactorily? Explain: | | | | | Yes | no |
|  | | | | | | |
| 1. Did the student spend the required amount of time at your office? | | | | | Yes | no |
| 1. How much time per week did you spend supervising the student (including explaining assignments, reviewing written work, preparing and discussing cases, etc? | | | | | \_\_\_\_\_\_\_ hours | |
| 1. Describe the progress the student made during the course of the semester (i.e. improvements toward the educational goals identified at the beginning of the semester, using examples when possible. | | | | | | |
|  | | | | | | |
| 1. What other benefits do you think the law student derived from this placement? | | | | | | |
|  | | | | | | |

|  |  |  |  |
| --- | --- | --- | --- |
| 1. **COMPETENCY ASSESSMENT:** | | |  |
| The student has demonstrated these professional competencies: | Yes | No | n/a |
| **Professional responsibility** |  |  |  |
| Conducts self in an ethical manner so as to promote confidence in the legal profession. |  |  |  |
| Relates to supervisors, peers, clients, and others in a manner consistent with professional standards. |  |  |  |
| Demonstrates sensitivity to real and ascribed differences in power between themselves and others. |  |  |  |
| Is aware of and appreciates the values of the profession. |  |  |  |
| **Competence** |  |  |  |
| Recognizes the limitations of his or her expertise. |  |  |  |
| Takes responsibility for compensating for his or her deficiencies. |  |  |  |
| Takes responsibility for assuring client welfare when encounter boundaries of her or his expertise. |  |  |  |
| **Maturity** |  |  |  |
| Demonstrates appropriate self-control (such as anger control, impulse control) in interpersonal relationships with supervisors, peers, and clients. |  |  |  |
| Demonstrates honesty, fairness, and respect for others. |  |  |  |
| Demonstrates the ability to receive, integrate, and utilize feedback from peers, teachers, and supervisors. |  |  |  |
| Exhibits appropriate levels of self-assurance, confidence, and trust in own ability. |  |  |  |
| Follows professionally recognized conflict-resolution processes, seeking to informally address the issue first with the individual(s) with whom the conflict exists. |  |  |  |
| **Integrity** |  |  |  |
| Refrains from making statements that are false, misleading, or deceptive. |  |  |  |
| Avoids improper and potentially harmful relationships. |  |  |  |
| Respects the fundamental rights, dignity and worth of all people. |  |  |  |
| Respects the rights of all individuals to privacy, confidentiality, and choices regarding self-determination and autonomy. |  |  |  |

|  |  |  |
| --- | --- | --- |
| 1. Please describe the student’s areas of strength: | | |
|  | | |
| 1. Please identify areas for further growth: | | |
|  | | |
| 1. Please describe the student’s level of professionalism: | | |
|  | | |
| 1. Do you have any concerns regarding the student’s performance? | | |
|  | | |
| 1. Do you recommend the student receive credit? | Yes | no |
| 1. Have you reviewed this evaluation with the student? | Yes | no |
| 1. May we share your comments with the student? | Yes | no |
| Please share any comments and suggestions regarding the field placement/externship program: | | |
|  | | |

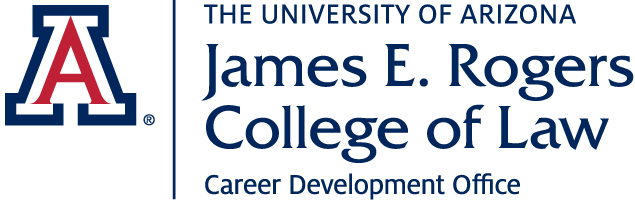
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Signature Date

Please return to:

Amanda Bynum

*Director of Externships & Bar Success*

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[abynum@email.arizona.edu](mailto:abynum@email.arizona.edu) / (520) 621-4212