

DEACON FORMATION FIELD EDUCATION EVALUATION FORM (PART 2)

Local Supervisor's Portion

Name of Student: _____ Name of Supervisor: _____

1. Student's level of accountability / reliability

2. Student's ability to relate to others

3. Student's ability to work collaboratively in ministry

4. Student's openness to supervision

5. Student's ability to understand pastoral issues and formulate pastoral responses

6. Student's ability to relate theology to their ministerial experiences

7. Student's areas of strength and weakness

8. Suggestions for continued growth

9. Any other comments regarding the field experience:

The student and local supervisor met and reviewed the above comments on (date): _____

Signatures:

Student signature: _____

Local supervisor: _____

Director of Field Education: _____

Date: _____