**Practicum Review and Evaluation**

Student: Program:

Program Director: Dr. Julia Alleyne

Faculty Supervisor:   
  
Date: August 21, 2017

This is an \_\_\_\_\_ Interim Review or \_\_ Final Evaluation.

**Overall assessment:**

Interim Review Final Evaluation

\_\_\_ Pass **\_\_\_\_ Pass \_\_\_ Letter Grade \_\_\_\_ Numeric Grade**

\_\_\_ Conditional \_\_\_\_ Conditional \_\_\_\_ Revised Deadline

\_\_\_ Fail \_\_\_\_ Fail

**Comments:**

|  |  |  |
| --- | --- | --- |
| **Item** | **Strengths** | **Areas to Improve** |
| Writing Ability |  |  |
| Reflective Insight |  |  |
| Scholarly Quality |  |  |
| Presentation |  |  |

**Future Work Recommendations**