

Handout 15.17

SUPERVISOR EVALUATION

The following is a questionnaire to help me learn the extent to which I am providing adequate and appropriate supervision to staff members. I would appreciate your candor in responding. You do not have to sign this evaluation. (Add a short statement to clarify rating if necessary.)

Rating Scale: 5 = Always, 4 = Usually, 3 = Sometimes, 2 = Rarely, 1 = Never

A. Supervisor's Awareness

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|--|-----------|
| 1. Understands the problems confronting me as I carry out my responsibilities. | 5 4 3 2 1 |
| 2. Understands children and their developmental levels. | 5 4 3 2 1 |
| 3. Demonstrates a broad background in curriculum and program issues. | 5 4 3 2 1 |

B. Supervisor's Communication and Support

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| 1. Is readily available to discuss problems or concerns. | 5 4 3 2 1 |
| 2. Responds promptly to written communication. | 5 4 3 2 1 |
| 3. Is receptive and supportive when I request help in solving a problem. | 5 4 3 2 1 |
| 4. Provides useful suggestions for solving problems. | 5 4 3 2 1 |
| 5. Treats me with courtesy and respect. | 5 4 3 2 1 |
| 6. Keeps me informed of building or systemwide issues that relate to my school or program. | 5 4 3 2 1 |
| 7. Communicates effectively with staff. | 5 4 3 2 1 |
| 8. Communicates effectively with parents. | 5 4 3 2 1 |
| 9. Communicates effectively with the central administration. | 5 4 3 2 1 |
| 10. Supports me when I have a conflict with students or parents. | 5 4 3 2 1 |
| 11. Assists in the resolution of personnel matters quickly and appropriately. | 5 4 3 2 1 |

C. Supervisor's Decision Making

- | | |
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| 1. Actively encourages collaborative decision making on substantive issues. | 5 4 3 2 1 |
| 2. Provides adequate time and opportunity for expression of opinions of those concerned. | 5 4 3 2 1 |

D. Supervisor's Observations

1. Could make the observations process more helpful to me in the following ways:

E. Professional Development

- | | |
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| 1. In-service workshops are relevant to my needs and development. | 5 4 3 2 1 |
|---|-----------|

F. Meetings

- | | |
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| 1. I have adequate opportunity to contribute to the agenda of the department meeting. | 5 4 3 2 1 |
| 2. The content of the department meeting is relevant to my needs. | 5 4 3 2 1 |

G. Clinical Supervision

- | | |
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| 1. Individual supervision assists with my development as a professional. | 5 4 3 2 1 |
| 2. Group supervision assists with my development as a professional. | 5 4 3 2 1 |
| 3. Peer supervision is helpful to my professional development. | 5 4 3 2 1 |
| 4. Adequate time is available to participate in supervision activities. | 5 4 3 2 1 |

H. Supervisor's Overall Performance

- | | |
|--|-----------|
| 1. On a scale of 5 to 1, with 5 representing "outstanding" and 1 representing "unsatisfactory," I would rate overall performance as follows: | 5 4 3 2 1 |
| 2. I would make the following suggestions for improvement: | |

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