



SUPERVISION EVALUATION FORM

(To be completed and submitted to qualifying@thecpca.ca by the Supervisor) for:

MBR# _____
(Candidate member name)

Submitted by: _____,
(Supervisor's name) (Qualifications)

Length of Supervisory Role with Applicant: _____ years _____ months, for (approx.) _____ hours per month.

Type of supervision (circle all that apply):

Individual Group Private Consultation Agency Staff meetings Other: _____

Please mark the applicant's **level of ability** in each area using the following rating scale:

1- Exceptional ability; 2- Average ability; 3- Needs improvement in this area; 4- Unknown.

- ___ Ability to assess for suicidal or homicidal risk and take necessary action.
- ___ Ability to follow protocol in reporting child or elder abuse to the appropriate authorities.
- ___ Ability to conduct a thorough assessment in order to insure that clients' needs fall within the applicant's scope of training and experience.
- ___ Ability to make appropriate referral to another professional if the applicant does not possess the training or experience to serve the client.
- ___ Ability to establish trust and a therapeutic alliance with clients.
- ___ Ability to conduct counselling practices according to the ethical standards put forth by the applicant's professional association.
- ___ Ability to maintain client confidentiality.
- ___ Ability to set goals and deliver treatment based on theories/models of counselling recognized to be effective in the applicant's area of practice.
- ___ Ability to maintain case records and progress notes, and conduct written correspondence with other professionals.
- ___ Ability to incorporate ethical thought and action into their counselling with ethical decision-making.

Comments / Recommendations (feel free to attach a separate sheet, if required):

I understand that this form is confidential between the Supervisor and the CPCA.

I agree to the above and affirm that the information provided by me is true and accurate

(Supervisor signature – named above)

(Date)