**Supervisor Feedback Form**

**Name**

**Position**

**Completed by:**

**Date:**

*Please give any feedback you’d like to share about your supervision by your supervisor.*

**OVERALL**

**STRENGTHS**

**AREAS FOR GROWTH**

This evaluation was discussed with me on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_. (Date)

Recipient Comments:

Agreements:

Staff Member’s Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Supervisor’s Signature/Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_