

## COUNSELING FACULTY OBSERVATION FORM

NOTE TO OBSERVER: Review the counselor's duties and responsibilities PRIOR to your observation. Evaluate the counselor's performance and contact with students using specific, detailed examples.

OVERALL OBJECTIVE: To determine whether the counselor demonstrates proficiency in counseling services and interpersonal relations.

### RATING KEY:

- A. Exceeds Expectations
- B. Meets Expectations
- C. Needs Improvement
- D. Unsatisfactory
- E. Not Enough Information/Not Applicable

Counselor: \_\_\_\_\_

Evaluator: \_\_\_\_\_

Date: \_\_\_\_\_ Scheduled Time: \_\_\_\_\_

\_\_\_\_\_ Time Session Began: \_\_\_\_\_

Session Location: \_\_\_\_\_

Type of Counseling Session Observed (e.g., General, TRIO, EOPS, Athletes, Transfer, Career, Meta Major, etc.): \_\_\_\_\_

### Counseling Topics Covered (check all that apply)

- |   |   |
|---|---|
| <input type="checkbox"/> Career/Major                                     | <input type="checkbox"/> Probation/Dismissal            |
| <input type="checkbox"/> General Education                                | <input type="checkbox"/> Schedule Creation              |
| <input type="checkbox"/> Graduation/Certificate Requirements/Applications | <input type="checkbox"/> Student Educational Plan (SEP) |
| <input type="checkbox"/> Financial Aid                                    | <input type="checkbox"/> Transfer                       |
| <input type="checkbox"/> Personal   | <input type="checkbox"/> Other _____                    |

RATING KEY:

- A. Exceeds Expectations B. Meets Expectations C. Needs Improvement D. Unsatisfactory  
 E. Not Enough Information/Not Applicable

Rated section	A	B	C	D	E	Comments or examples of behavior
<p>1. <b>Building Rapport:</b> <i>The counselor conducted the session in a manner that established rapport with the counselee.</i></p> <p><b>Examples:</b></p> <ul style="list-style-type: none"> <li>a. Created an empathetic environment</li> <li>b. Actively and effectively listened to the student</li> <li>c. Demonstrated clear and concise communication</li> <li>d. Fostered a climate of mutual respect</li> <li>e. Sensitive to student differences &amp; their situations (regardless of national origin, religion, age, gender, gender identity, gender expression, race or ethnicity, color, medical condition, genetic information, ancestry, sexual orientation, marital status, physical or mental disability, or pregnancy)</li> <li>f. Engaged student in the session</li> <li>g. Responded clearly and precisely to individual needs and special circumstances</li> </ul>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<p>2. <b>Expertise:</b> <i>The counselor demonstrated knowledge of counseling practices and skills appropriate to the session</i></p> <p><b>Examples:</b></p> <ul style="list-style-type: none"> <li>a. Provided accurate, applicable information for advising and planning</li> <li>b. Demonstrated knowledge of policies &amp; procedures</li> <li>c. Used counseling-related tools when applicable</li> <li>d. Applied knowledge of student support resources and procedures to access services</li> </ul>						

e. Completed appropriate forms, if applicable						
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RATING KEY:

- A. Exceeds Expectations      B. Meets Expectations    C. Needs Improvement    D. Unsatisfactory  
 E. Not Enough Information/Not Applicable

<p>3. <b>Counseling and Advising:</b> <i>The counselor communicated clearly and provided counseling and advising practices that were appropriate to the student's needs</i></p> <p><b>Examples:</b></p> <ul style="list-style-type: none"> <li>a. Developed a Student Educational Plan addressing the student needs/goals</li> <li>b. Assisted in researching relevant information</li> <li>c. Developed a class schedule</li> <li>d. Performed unofficial transcript evaluation</li> <li>e. Helped student clarify goals</li> <li>f. Reviewed student notes from previous counseling session</li> </ul>	□	□	□	□	□	
<p>4. <b>Appointment Structure/Organization:</b> <i>The counselor conducted the session in a thoughtful and organized manor appropriate to the student's needs</i></p> <p><b>Examples:</b></p> <ul style="list-style-type: none"> <li>a. Prioritized concerns and established tasks to be covered</li> <li>a. Made appropriate referrals and provided necessary information</li> <li>b. Clarified and reinforced next steps identified during the session</li> <li>c. Encouraged a follow up appointment as needed</li> <li>d. Collaborated with other staff and outside resources when needed</li> </ul>	□	□	□	□	□	

RATING KEY:

- A. Exceeds Expectations      B. Meets Expectations   C. Needs Improvement   D. Unsatisfactory  
E. Not Enough Information/Not Applicable

Rated section	A	B	C	D	E	Comments or examples of behavior
<p><b>5. For DSPS Faculty ONLY:</b> <i>The DSPS faculty demonstrated expertise commensurate with those required for providing services to students with disabilities on a college campus</i></p> <p><b>Examples:</b></p> <p>a. Facilitated an interactive discussion to help determine individual student needs</p> <p>b. Completed necessary programmatic documentation during session</p> <p>c. Reviewed specific program policies and procedures as appropriate</p> <p>d. Assisted the student in developing greater self- advocacy skills, and/or implementing specific individual success strategies to promote student success</p> <p>e. Demonstrated an understanding and comfort with addressing disability specific issues effecting the students' academic success</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

OVERALL PERFORMANCE RATING

- A. Exceeds Expectations
- B. Meets Expectations
- C. Needs Improvement (Refer to Appendix G)
- D. Unsatisfactory (Refer to Appendix G)

EVALUATOR'S FINAL COMMENTS:

I have met with the evaluatee and discussed the evaluatee's Counseling

Observation Signed: \_\_\_\_\_ Date: \_\_\_\_\_  
Evaluator

EVALUEE'S FINAL COMMENTS:

I have met with the evaluator and discussed my Counseling Observation

Signed: \_\_\_\_\_ Date: \_\_\_\_\_  
Evaluatee