Student Name:

Supervisor's Name:

Date:

Please list and shortly describe three (3) areas of strength that the student exhibited.

Please list three (3) areas for growth for the student; and suggestions about resources for growth and development.
How has the student exhibited growth in their self-understanding and identity as a future pastor, deacon, or lay leader?

What are the student’s three best gifts in worship leadership and preaching? What are three growth areas?

Please describe your experience with how the student received feedback and engaged in critical reflection?
What recommendations do you have for the student in their future engagement with supervisors and mentors?

Student’s Response

- [ ] I have read my supervisor’s assessment and agree that it is a fair evaluation of me and my MIC experience.
- [ ] I have read my supervisor’s assessment and agree with the evaluation with the following exceptions or additions:

Signatures

Student’s Signature ___________________________ Date ___________________________

Supervisor’s Signature ___________________________ Date ___________________________

Instructions for submitting evaluation:

Please mail completed, signed evaluations to:
Pacific Lutheran Theological Seminary
Contextual Education Office
PO Box 525
Berkeley, CA 94701

OR
email completed evaluations to: contexted@plts.edu

Every effort should be made to get signatures, but in the time of COVID, typed names will suffice.