

EVANGELINE PARISH
GUIDANCE COUNSELOR
OBSERVATION FORM

Counselor: _____ Date: _____

____ 0 – 3 Years of Experience Observation Period: From: _____
 ____ 4 + Years of Experience To: _____

School: _____ Observer: _____

PRECONFERENCE DATE: _____

The observer will circle the appropriate rating for each item listed below:
SCALE: S–Satisfactory; NI–Needs Improvement; U–Unsatisfactory; NO–Not Observed

Performance Criteria		Rating			
I.	Performance and Professional Qualities				
A.	Maintains confidentiality;	S	NI	U	NO
B.	Exhibits positive professional attitude;	S	NI	U	NO
C.	Communicates effectively;	S	NI	U	NO
D.	Demonstrates flexibility	S	NI	U	NO
E.	Develops and submits a Professional Growth Plan	S	NI	U	NO
CATEGORY RATING		S	NI	U	NO

COMMENTS: _____

II.	Job Responsibilities				
A.	Serves as an interpreter of student data;	S	NI	U	NO
B.	Conducts orientation sessions for new students;	S	NI	U	NO
C.	Assists with scheduling;	S	NI	U	NO
D.	Provides counseling and/or consultation as requested by administrators and faculty;	S	NI	U	NO
E.	Refers students to appropriate agencies;	S	NI	U	NO
F.	Provides drop out prevention counseling	S	NI	U	NO
G.	Assists students with proper placement with regard to tutoring and/or summer school	S	NI	U	NO
H.	Provides counseling in individual and group settings	S	NI	U	NO
I.	Provides career counseling	S	NI	U	NO
J.	Performs other professional responsibilities in line with counseling position as assigned	S	NI	U	NO
K.	Maintains “counselor’s log”	S	NI	U	NO
CATEGORY RATING		S	NI	U	NO

COMMENTS: _____

III. Professional Growth Plan

A. Working towards achievement of Professional Growth Plan

S NI U NO

CATEGORY RATING

S NI U NO

Comments: _____

I have read the above observation. My signature does not indicate agreement or disagreement.

Signature/Title of Observer

Signature of Counselor

Date

Date

Counselor's Comments: _____

