

Supervisor Evaluation
Calvary University
Christian Ministries Office

<p align="center">Due at Debriefing Interview with Director</p> <input type="checkbox"/> Fall of ___ Ministry <input type="checkbox"/> Spring of ___ Ministry

Student's Name:	Supervisor's Name:
Ministry:	Position:

Please complete the following evaluation and return it to the Christian Ministries Office by the time of the student's scheduled debriefing interview. Your evaluation enables me to better critique the ministry of the student you supervised. The feedback you provide also aids me in counseling the student more effectively about ministry and his total development. I appreciate your thoroughness and honesty. -Rev. Joe Everett, cmin@calvary.edu, 816-322-0110 Ext. 1343

Please use the columns below to record your evaluation of the student, using the following key and by checking all that apply.
 S = Strength G = Growing W = Weakness U = Unacceptable NO = Not Observed

MINISTRY PERFORMANCE	S	G	W	U	NO
1. In showing love and concern for others					
2. In knowing the Word of God					
3. In being well prepared (including prayer)					
4. In maintaining order					
5. In varying presentation of program or lesson					
6. In communicating well and on proper age level					
7. In seeking added opportunities to minister					
8. On encouraging student participation					
PERSONAL QUALITIES					
1. Tactful (speaks truthfully without offending)					
2. Teachable and eager to learn					
3. Cheerful, warm, and friendly					
4. Shows good judgment					
5. Dependable					
6. Neat in appearance					
SOCIAL SKILLS					
1. Displays leadership and is respected by others					
2. Courteous and respectful to all					
3. Cooperative with supervisors and coworkers					
4. Flexible with change (handles change well)					
5. Builds healthy relationships					

<p>Check One</p> <input type="checkbox"/> Yes, I recommend the student continue in this type of ministry. How can the student improve in order to have a more effective ministry in the future? (For example: grow more in some area, gain more knowledge or experience, make changes.) <input type="checkbox"/> No, I do not recommend the student for this ministry. What other ministries would you suggest the student try?

Did the student have planned prayer times with you and/or coworkers? Yes No

How well did the student communicate with you and coworkers?

What were the student's responsibilities?

What did the student do well in this ministry?

What did the student do poorly?

What obstacles did the student face in this ministry and how well did he/she overcome those obstacles?

Please feel free to comment on any aspect of the student's ministry and character:

Has the student been faithful in their ministry attendance?

Is there any way that the Christian Ministries Office could have been more helpful to you as you supervised this student?

Always There Missed: 1 wk 2 wks 3 wks 4 wks 5 or more weeks (do not count college break times)

When not able to be at their ministry: Always notified me Usually notified me Very poor at notifying me

Supervisor's Signature:

Date:

Church or Organization:

Check One

- Yes, I have discussed this evaluation with the student. Since you are supervising this student in ministry, Calvary strongly encourages you to talk with the student about what you have written on this evaluation. If you were not able to, please check the box below so that we will know to review the evaluation with the student.
- No, I have not discussed this evaluation with the student.

Thank you for your time and help in training our student to live and serve in the church and world according to a biblical worldview.

Please return this form to:

Christian Ministries Office
Fax: 816-331-4474
E-mail: cmin@calvary.edu