

FIELD INSTRUCTOR EVALUATION OF FIELD LIAISON EFFECTIVENESS
EAST TENNESSEE STATE UNIVERSITY
DEPARTMENT OF SOCIAL WORK
MASTER OF SOCIAL WORK PROGRAM

NAME OF YOUR LIAISON: _____ **Semester/Yr.**_____

- I. The role of field liaison was clear:
 YES_____NO_____
- II. I had contact with my liaison this past semester:
 YES_____NO_____
- III. If you needed assistance, did you invite contact with the liaison?
 YES_____NO_____

IV. Field liaisons are assigned the following functions; please indicate an evaluation of how your liaison carried out these functions:

(1) Most satisfactory (2) Satisfactory (3) Unsatisfactory (4) Not applicable

Evaluation Statement	1	2	3	4
1. To evaluate range and quality of learning experiences and learning environment.				
2. To provide information, support and consultation to field instructor.				
3. To assist in problem solving in all aspects of field internship.				
4. To maintain communication link between school and agency.				
5. To make site visits.				
6. To meet with field instructor(s) and student(s), together or separately, or both.				
7. To discuss student performance.				
8. To participate in trouble shooting.				

V. Please make any other comments you wish. This questionnaire will be kept confidential. Information will be combined with other questionnaires and general feedback will be provided to the field liaison.

VI. Please comment on any aspect related to the Department of Social Work. We are interested in gaining any and all information and feedback which would enable us to improve our school's education program.

Date: _____

Please feel free to sign or not.

Signature _____

Agency _____

Please Return To:

Amber Street, LCSW
Director of Field Instruction
ETSU Department of Social Work
Box 70645
Johnson City, TN 37614-1702