MIDTERM EVALUATION

This form is to be completed by the Field Instructor and discussed with student. It will automatically be sent to the Faculty Field Liaison once it is completed online.

Student: ________________________________

Agency: ________________________________

Agency Field Instructor(s): ________________________________

Faculty Field Liaison: ________________________________

Please Check One:

☐ BSW

☐ BSW WOW

☐ MSW Foundation Year

☐ MSW Advance Year

Please check and complete all that apply.

☐ Student has received agency orientation and work space has been assigned.

☐ Student has completed ______ hours to date. Note: If students have not completed the minimum hours listed below a Midterm Evaluation should not be completed at this time.
<table>
<thead>
<tr>
<th>Year</th>
<th>Hours per week</th>
<th>Midterm Clock Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>BSW Seniors</td>
<td>16</td>
<td>115</td>
</tr>
<tr>
<td>BSW WOW Seniors</td>
<td>32</td>
<td>230</td>
</tr>
<tr>
<td>MSW Foundation Year</td>
<td>16</td>
<td>113</td>
</tr>
<tr>
<td>MSW Advanced Year</td>
<td>16 or 24*</td>
<td>113 or 169</td>
</tr>
</tbody>
</table>

*Only Advanced Year MSW students (traditional or advanced standing) may opt to do Field work for 24 hours each week students should be registered for 6 credit hours.

- Student is actively engaged in weekly supervision.
- Learning Plan has been completed and submitted to the Field Instructor and Faculty Field Liaison.
- Process Recordings or PRACSIS have been reviewed by Field Instructor and submitted to the Faculty Field Liaison (students should check with assigned Faculty Field Liaison to find out the number of Process Recordings or PRACSIS required).

**Instructions for completing the mid-term evaluation:** Please evaluate student’s performance halfway through the semester by indicating Progress, No Progress, or No Opportunity. Please reference the student’s Learning Plan specific practice outcomes to determine the rating.

**Performance rating scale based on the (10) competencies:**

**PROGRESS** – Student met performance expectation and/or is exhibiting progression to meet expectations
**NO PROGRESS** – Student did not meet performance expectations

**NO OPPORTUNITY** – There was not an opportunity to meet expectations

<table>
<thead>
<tr>
<th>COMPETENCIES 1 – 10</th>
</tr>
</thead>
<tbody>
<tr>
<td>I. Demonstrate Ethical and Professional Behavior</td>
</tr>
<tr>
<td>II. Engage Diversity and Difference in Practice</td>
</tr>
<tr>
<td>III. Advance Human Rights and Social, Economic, and Environmental Justice</td>
</tr>
<tr>
<td>IV. Engage in Practice-informed Research and Research-informed Practice</td>
</tr>
<tr>
<td>V. Engage in Policy Practice</td>
</tr>
<tr>
<td>VI. Engage with Individuals, Families, Groups, Organizations, and Communities</td>
</tr>
<tr>
<td>VII. Assess Individuals, Families, Groups, Organizations, and Communities</td>
</tr>
<tr>
<td>VIII. Intervene with Individuals, Families, Groups, Organizations, and Communities</td>
</tr>
</tbody>
</table>
IX. Evaluate Practice with Individuals, Families, Groups, Organizations, and Communities

X. Analyze the impact of the urban context on a range of client systems, including practice implications

In the section below, please provide an Overall Rating of Progress or No Progress for the student’s performance, as indicated by the rating that is most frequent of the ten (10) competencies. All parties are required to sign the midterm evaluation to indicate that they have discussed the evaluation, even if the student does not agree with the evaluation.

FIELD INSTRUCTOR SECTION

Recommend: 

If “no progress” is selected, you must contact the assigned Faculty Field Liaison immediately to develop and implement a Corrective Action Plan with the student.

**Please note: By typing my name below, I certify that I have reviewed the document, completed my portion and agree with the content.

( [Field Instructor Name]): Click to sign Completed Document
Field Instructor (agency-based supervisor)

STUDENT SECTION
I... with the evaluation.

Comments:

**Please note: By typing my name below, I certify that I have reviewed the document, completed my portion and agree with the content.**

By signing you will submit Midterm FIASC information to the assigned faculty advisor from the Wayne State University School of Social Work. Once the form is completed you will not be able to modify your responses.

([Student Name]):  Click to sign Completed Document
Student

([Faculty Field Liaison Name]):  Click to sign Completed Document
Faculty Field Liaison

Note: You must click on the SAVE button to save any information entered or changed on this page before closing or printing the page, or your information will be lost.