

San Jose State  
University Department  
of Special Education  
Student's Opinion of Fieldwork Experience

Date: \_\_\_\_\_ Name: (optional) \_\_\_\_\_

Semester: \_\_\_\_\_ Course: \_\_\_\_\_

Name of the person you are evaluating: \_\_\_\_\_

Role of the person you are evaluating: Support Provider

Describe your experiences with this individual in the following areas:

Professional respect:

Rapport:

Describe your communication with this individual in the following areas:

Clarification of expectations:

Accessibility:

This individual's response to requests:

Varied observation & consultation times:

**What methods were used to develop your skills? Circle All**

1. Feedback on observed lessons
2. Demonstration
3. Introduction to new materials
4. Discussion about evidence based best practices
5. Examination of IEPs, assessments
6. Other \_\_\_\_\_

**Support Provider contacts:**

1. Number of classroom observations by Support Provider: \_\_\_\_\_
2. Was the amount of observation time: (Circle one)  
Adequate      Too much      Too little
3. Number of telephone or email contacts \_\_\_\_\_
4. Number of individual/personal meetings \_\_\_\_\_
5. Was the amount of conference time: (Circle one)  
Adequate      Too much \_      Too little\_

**What have you gained from this practicum experience?**

**What are the strengths of your Support Provider?**

**In which areas do you think your Support Provider needs to improve?**

**Suggestions for improving this course:**