# PERALTA COMMUNITY COLLEGE DISTRICT

**Health Services Coordinator—Faculty Observation Form Counseling-focused Services**

Name of Counselor:

College: Semester: Date: Name of Observer:

The following information is requested by the TRC/Evaluation Committee:

1. Counseling Activity: (check all relevant topics)

*Note: No single counselor is expected to perform all of these tasks in any single observation period and it is understood that some counselors provide specialized services*.

* 1. Workshops
	2. Service Coordination
	3. Interaction with campus community
	4. Interaction with community-based organizations
	5. Event planning
	6. Outreach
	7. Committee participation
	8. Program Development
	9. In- service training
	10. Other (specify)
1. Please check the appropriate line(s) to indicate which items were observed during the session.

|  |  |  |
| --- | --- | --- |
|  | **Referring to the Health Services Coordinator** | **Notes and Comments Illustrating the Observation** |
|  | The counselor made participants feel comfortable and was attentive to their concerns. |  |
|  | The counselor demonstrates adequate knowledge of subject matter. |  |
|  | Demonstrates awareness of diversity. |  |
|  | Works cooperatively with other staff and outside agencies. |  |
|  | Effective verbal and written communication skills. |  |
|  | Support materials (media, equipment, handouts) were appropriately and effectively used. |  |
|  | Applies multi-cultural competencies as appropriate. |  |
|  | Demonstrates cultural humility in observed activities. |  |

1. In your opinion, what was most helpful/valuable in what you observed?
2. In your opinion, what could be more helpful?
3. Other Observations:

|  |  |  |
| --- | --- | --- |
| Check if applicable |  | **Notes and Comments Illustrating the Observation** |
|  | Assumes share of department/division responsibilities. |  |
|  | Participates in shared governance system; chairs/serves on college/district committees |  |
|  | Works cooperatively with faculty, administrators, staff and students. |  |
|  | Provides appropriate in-service training and student advocacy on campus and in the community. |  |
|  | Handles conflict/stress situations appropriately. |  |
|  | Keeps office hours and is accessible to students. |  |
|  | Keeps current in the discipline (includesspecialized information necessary to perform the duties of the position). |  |
|  | Performs and serves the college well in meeting its obligations to students. |  |
|  | Maintains appropriate files and completes mandated forms. |  |

# Overall performance rating:

**Superior** *surpasses requirements; exceeds expectations*

**Satisfactory** *meets all standards of excellence as described in the policy* **Below Standards** *does not consistently meet requirements* **Unsatisfactory** *does not meet requirements; ineffective*

## *Observer: Date:*

***Evaluee: Date:***

*The evaluee’s signature on this form does not constitute acceptance of this evaluation. The evaluee has the right to append their own written comments.*

*Approved 8/25/2016*