

# **SUPPORT PERSON'S EVALUATION OF STUDENT**

*Ministry Formation Program, McMaster Divinity College*

Appendix C9

**STUDENT'S NAME:**

**DATE:**

**Instructions:** *Your honest and open feedback will make a valuable contribution to the student's self-understanding and development in ministry. Please note that this evaluation form will not be released to parties outside the College without the student's consent. Please give the completed evaluation to the Placement Supervisor. Thank you so much for your investment in this student.*

## **I. OBSERVATIONS**

*From your observations, what do you see as the student's strengths and weakness?*

## **II. RECOMMENDATIONS**

*What recommendations or suggestions do you think would advance the student's growth and preparation for ministry?*

## **III. ANY ADDITIONAL COMMENTS**

**SIGNATURE:**