



Metropolitan New York Synod
Evangelical Lutheran Church in America
God's work. Our hands.

Final Evaluation Form (Supervisor)

(Due October 31 – Please comment on the following and add pages as needed)

Synod Diaconate Internship for: (Name) _____

Proficiency in Ministry: _____

Time Management: _____

Interpersonal Skills: _____

Spiritual Life / Self Care: _____

Collegial / Supervisory Issues: _____

Other Comments: _____

Signed _____

(Supervisor / Pastor)

Date: _____

Signed _____

(Intern)

Date: _____

Final Evaluation Form (Support Group)

(Due October 31 – Please comment on the following and add pages as needed)

Synod Diaconate Internship for: (Name) _____

Proficiency in Ministry: _____

Time Management: _____

Interpersonal Skills: _____

Spiritual Life / Self Care: _____

Collegial / Supervisory Issues: _____

Other Comments: _____

Signed _____

Date: _____

(Support Group)

Date: _____

(Support Group)

Date: _____

(Support Group)

Signed _____

Date: _____

(Intern)

Final Evaluation Form (Intern)

(Due October 31 – Please comment on the following and add pages as needed)

Synod Diaconate Internship for: (Name) _____

Proficiency in Ministry: _____

Time Management: _____

Interpersonal Skills: _____

Spiritual Life / Self Care: _____

Collegial / Supervisory Issues: _____

Other Comments: _____

Signed _____

(Intern)

Date: _____