**DOCTORAL PROGRAMME IN EDUCATIONAL PSYCHOLOGY:** Placement Handbook

### Appendix 3: Placement Learning: Individual Evaluation Form [IEF]

Last updated: August 2022

The following form can be given out by the trainee to anyone they have worked with on placement (teachers, SENCOs etc.) to obtain feedback on the service they have provided.

Completed forms should be handed in as part of the practical work file at the end of the year.

**Evaluation of service provided by Trainee Educational Psychologist (TEP)**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| To |  |  | About | name of child or young person |
|  |  |  |  |  |
| Role | e.g. parent, teacher, SENCO, TA etc. |  | Date |  |

We know that you worked recently with a Trainee Educational Psychologist. To help us with their training, we would be very grateful if you could complete this form. Please *circle* as appropriate and feel free to make additional comments.

Did the trainee educational psychologist:

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| *Make appropriate appointments with you?* | | | | Yes | Partly | | No |
| *Keep all appointments made, and on time?* | | | | Yes | Partly | | No |
| *Give you an opportunity to state and discuss any concerns you had?* | | | | Yes | Partly | | No |
| *Give clear verbal information in person?* | | | | Yes | Partly | | No |
| *Give clear written information?* | | | | Yes | Partly | | No |
| *Give you all the information you required? If no, please tell us what further information would have been helpful.* | | | | Yes | Partly | | No |
|  | | | | | | | |
| *Help you in making a plan for the child/young person? If no, please tell us what would have helped with this.* | | | | Yes | Partly | | No |
|  | | | | | | | | |
| *We know that this piece of involvement is now over. If you came across this trainee again in the future, how willing would you be to work with them again?* | | | | | | | | |
| Very  willing | A little bit willing | In the middle between willing and unwilling | A little bit unwilling | | Very  unwilling | |
| *Please tell us why.* | | | | | | | | |
|  | | | | | | | | |

|  |
| --- |
| The trainees have not yet completed their training, so we know that there are things that they are already doing well, and things that they could or should improve. We really need this sort of feedback.  Can you tell us first about the things that you felt that the trainee did well? |
|  |
| And can you tell us about the things that you think that the trainee could aim to improve? |
|  |
| Is there anything else that you’d like us to know about your work with the trainee? |
|  |

Thank you so much for taking the time to complete this form. Now please return this form to

……………………………………………………………………………………………..