CITY ON A HILL
URBAN BIBLE COLLEGE

Practicum Report Evaluation

Name of Student_____

Month Evaluating _____**Date**_____

Practicum_____

Please evaluate the student's Practicum Report in the following areas:

	1- Needs Improvement	**2- Quality Present**	**3- Average**	**4- Good**	**5- Excellent**
Overall level of reflection	1	2	3	4	5
Summary of ministry related activities	1	2	3	4	5
Summary of personal and ministry related challenges	1	2	3	4	5
Assessment of areas of strengths, needed growth, and/or plans to address weaknesses	1	2	3	4	5
Application of spiritual principles (scripture references)	1	2	3	4	5

Grade_____/25
(Report Late – minus 2 points)

Any Additional Comments?

Leader Signature_____

Leaders: This is to be completed by you each month for each student. Please return to Urban Bible College by the ***first Friday of each month***.

UBC : Please make a copy of this and return to the ***student by the following Monday along with their practicum report.***