

Intern Evaluation for 1st Year [Confidential*]

Name of Intern: _____

Date: _____

Name of Supervisor: _____

Person completing this form (please tick):

Intern Supervisor Senior Elder Local Church Leader

This evaluation is to be completed during the 6th, 10th month of internship.

Please tick the appropriate box:

6th Month, 10th Month

To be completed independently by: Intern, Supervisor, Senior Elder and **three** Local Church Leaders of the intern's choice as negotiated with the supervisor.

Please send completed form to your local Conference/Mission Ministerial Secretary

This section to be completed by everyone:

For areas that deserve further comment, please use the space below, or over page		Needs to Improve			Excellent
Please tick to indicate your answer		1	2	3	4
1	Spirituality - passionate about God?				
2	Personal Devotional Life				
3	Prioritizes Evangelism				
4	Effectiveness in relational evangelistic activities				
5	Biblical Preaching				
6	Inspiring Preaching				
7	Preaching the Adventist Distinctives				
8	Effective Pastoral Care through visitation				
9	Work Ethic				
10	Effectiveness in completion of ministry tasks				
11	Professional Ethics - appropriate boundaries				
12	Personal financial Responsibility				
13	Builds relationships with community people				
14	Relates well to all people groups within the church				
15	Develops open, encouraging relationships with colleagues				
16	Denominational loyalty				
17	Attitude - to those to whom the intern is responsible				
18	Leadership Style				
19	Organization - Administrative ability				
20	Team Player				
21	Willingness to grow & learn				
22	Commitment to spouse & family (if applicable)				
23	Personal health habits				
24	Grooming & Appropriate attire				
25	Trust & Confidentiality				
26	Reliability - Dependability				
27	Suitability for Pastoral Ministry				
28	Christian Example				
29	Effective time management				

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This evaluation is a tool for assessing the professional progress of the intern and the effectiveness of the supervisor. This document will be made available to conference and union administrations and ministerial secretaries.

p.t.o.

<p>Please comment on the following: The intern's best personal & professional qualities:</p>
<p>Areas for improvement - personal & professional:</p>
<p>Is the intern demonstrating a call to ministry? Is the intern's development <input type="checkbox"/> Satisfactory? <input type="checkbox"/> Unsatisfactory? (Specify Areas of Concern) Other helpful comments:</p>
<p>To be completed by the intern only</p> <ul style="list-style-type: none"> • What are you enjoying about your internship? • What could enhance your internship?

To be completed by the intern and supervisor only

	Intern Alone	With Supervisor Modelling	With Supervisor Observing
a) Average number of pastoral visits per week			
b) Average number of sermons per month			
c) Average number of Bible Studies per week			
d) Average number of evangelistic visits per week			
e) Small groups conducted			
f) Public outreach programs conducted			

Number of Intern Development meetings during this evaluation period?	
Number of persons baptised this year (from the intern's ministry)	

Signature of person completing this evaluation: _____