



**TEW STAFF EVALUATION  
FORM 12.10.3**

**Name:** \_\_\_\_\_ **Date:** \_\_\_\_\_ **Location of TEW:** \_\_\_\_\_

**1. Teaching**

Strengths:

Learning needs:

Requirements:

**2. Supervision**

Strengths:

Learning needs:

Requirements:

**3. Training program design**

Strengths:

Learning needs:

Requirements:

**4. Personal style**

Strengths:

Learning needs:

Requirements:

**Staff endorsements/requirements:**

**ENDORSED** to initiate a TSTA Contract as: Teacher \_\_\_ Supervisor \_\_\_

**Area of specialization:** Counselling \_\_\_ Education \_\_\_ Organizations \_\_\_ Psychotherapy \_\_\_

**REQUIREMENTS:**

These requirements must be fulfilled. This paper and documentation of the requirements must be added to the contract when you send it to IBOC for endorsement.

**Note:** The TSTA Contract must be filed within one year of endorsement by the TEW. Formal training can start only once the TSTA Contract has been endorsed by IBOC.

**SIGNATURES:**

**Staff of TEW:**

**TEW supervisor:**

**Participant:**

**Date:**

**Requirements fulfilled:**

**Supervisor:**

**Participant:**

**Date:**