



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 _____ Date: _____
(Supervisor / Pastor)

Signed _____ Date: _____
(Intern)



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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: _____

_____ Date: _____

(Support Group) _____ Date: _____

_____ Date: _____

(Support Group) _____ Date: _____

Signed _____ Date: _____

(Intern) _____



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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: _____