

STUDENT FEEDBACK SHEET

DATE: _____

STUDENT: _____

PERSON GIVING FEEDBACK: _____

COUNSELING SKILL AREA	COMMENTS
1. ATTENDING	
2. ACT. LIST./EMPATHY/RESPONDING	
3. GENUINENESS/RESPECT	
4. CONCRETENESS	
5. SENSITIVITY TO SOC/CUL DIFF.	
6. IDENTIFYING THEMES/PERSONALIZ.	
7. SUMMARIZING/FOCUS	
8. SELF-DISCLOSURE	
9. FEEDBACK	
10. QUESTIONING	
11. CONFRONTATION	
12. TAKING ACTION	
13. ABILITY TO APPLY THEORY	
14. OPENNESS TO BEING A CLIENT	
15. OTHER SKILLS/TECHNIQUES	

ESTABLISHING
RELATIONSHIP

FACILITATING
UNDERSTANDING

ACTION

ADDITIONAL SUGGESTIONS: _____

