

Counseling Program - Application Evaluation
Part II: Applicant Phone Interview

Submit by Email

Print Form

ID

Reader:

Last Name

Current Date

First Name

Total Score /40

- 5 Exemplary/Outstanding
- 4 High quality applicant

- 3 Acceptable applicant
- 2 Fairly weak applicant

- 1 Clearly not acceptable

Knowledge Foundation Final Rating

Describe your strengths and challenges as a student?

Score

What experiences have you had that have helped you choose a graduate program in school counseling and USD in specific?

Score

Skills Foundation Final Rating

Describe your understanding of foundational counseling skills and on a 1-10 scale, how would you rate yourself on their development?

Score

Dispositions Final Rating

Our program requires a great deal of self reflection. Talk about how you will feel being involved in this level of personal introspection and growth?

Score

In your opinion, how does acquiring the knowledge and skills to work with diverse populations relate to the field of school counseling?

Score

Describe your experiences with collaboration and teamwork?

Score

Scenarios

In the past, when you have had a conflict with a person in authority, how did you handle it?

Score

Briefly describe a situation where you served in an advocacy or leadership role

Score