MSC REPORT FOR BASIC STUDENT FOR SPRING SEMESTER

To be completed and discussed with the student no later than April ____ 20___

Student to bring this evaluation to SCOFE group the week April ____ 20___

Student’s Name______________________________________________________________

Ministry Site __________________________________________________________________

Name of MSC Chairperson (please print) _________________________________________

Note: Most MSCs find it helpful to make individual notes on the evaluation form in each person’s handbook in advance of the evaluation meeting, discuss those initial thoughts at the meeting, and then write the final evaluation that will be discussed with the student and brought to CTS. Feel free to use and attach additional pages if needed.

Please offer helpful comments in response to each of the following, giving concrete examples whenever possible:

1. In what ways does the student develop relationships suitable for ministry? Please describe any concerns in this area.

2. In what ways does the student accept differences and handle conflict constructively? Please describe any concerns in this area.

3. How does the student respond when things do not go well? Please describe any concerns in this area.

4. Is it your assessment that the student lives a healthy, non-addictive life that balances work and play, as well as physical, emotional and spiritual well-being? Please describe any concerns in this area.
5. Does the student value and draw upon the MSC’s feedback and incorporate it into his/her self-awareness and practice of ministry? Please describe any concerns in this area.

6. In what ways do you recognize that the student has a clear sense of call to ministry? Please describe any concerns in this area.

7. Going forward, what remain as areas of growth for this student as a person and a pastor? Please describe any concerns in this area.

8. Thank you very much for being a part of the SCOFE program during this past year. Please offer your reflections on the experience.

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MSC Chairperson’s signature / date

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Student's signature/ date