



Student Feedback Form - Counselor - Form W

Instructions to Students

Please evaluate the counselor's performance by rating each statement below. Student Feedback Forms are anonymous. Select N/A if you do not have sufficient knowledge/information regarding a specific item, or believe that it is not applicable. As you respond to each statement, consider whether the counselor performed at a level you would rate:

1= Strongly Disagree

2= Disagree

3= Agree

4= Strongly Agree

NA= Not Applicable

1. Who are you evaluating? Please select the counselor's name.

Other (please specify)

2. Which quarter?

Summer 2024

Fall 2024

Winter 2025

Spring 2025

3. Where did you primarily meet with the counselor this quarter?

In-Person appointment

Telehealth appointment

4. I consulted with this counselor for the following assistance:

Personal/Mental Health

Career Exploration

Student Success Skills

Crisis

Other (please specify)

5. Please rate the following:

	Strongly Agree	Agree	Disagree	Strongly Disagree	N/A
The counselor seemed knowledgeable in my area of concern.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The counselor provided useful, accurate information.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

	Strongly Agree	Agree	Disagree	Strongly Disagree	N/A
The counselor explained assessment results so that I could understand them.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The counselor aided me to understand myself better.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The counselor showed a real interest in me and my concerns.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The counselor listened to me carefully.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The counselor was accepting of me as a person.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The counselor helped me with my concerns.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The counselor referred me to another resource if appropriate.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
In general, counseling was helpful for me.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

6. What did you find most helpful about your counseling experience?

7. How could the counselor be more helpful to you?

8. Other comments?

Done

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