



**EASTERN ONTARIO STAFF DEVELOPMENT NETWORK
SUPERVISORY OFFICER'S QUALIFICATION PROGRAM**

LEADERSHIP PRACTICUM EVALUATION FORM

This form is used to evaluate the candidate's Leadership Practicum and is completed at the Exit Exercise.

Exit Exercise Panel Comments (please use the back if necessary)

Candidate's Comments (please use the back if necessary)

Candidate's Signature: _____ Date: _____

The candidate has submitted a final report and has met all the requirements of the Practicum for the Supervisory Officer's Qualification Program.

Practicum Coordinator's Signature: _____ Date: _____