**Providing feedback about the trainee clinical psychologist you are/have been working with**

Thank you for offering your feedback. Below is a short form we would like you to complete and return. If you would rather talk to someone – please contact the trainee’s clinical supervisor via the details provided at the bottom of the information sheet.

Before you complete the form - please let us know the following by highlighting or circling

I am OK with my feedback being shared with the trainee

I am not OK with my feedback being shared with the trainee

We do not ask for your name on this form so the feedback is anonymous

**Name of trainee**

**What did the trainee do well in their work with you?**

**What did the trainee do that you didn’t like or would suggest they could develop or improve on?**

**Any other comments?**

**THANK YOU FOR YOUR FEEDBACK**

**Please return to: ADD DETAILS IN HERE BEFORE GIVING TO CLIENT**