**Self-Assessment of My School Counseling Program Practices**

**Directions:** The purpose of this survey is to reflect on your school counseling program practices. What are you doing well? Are there opportunities for growth? What level are your school counseling program practices?

Answer each question with a 1 to 5 response

(1= Strongly disagree/Never to 5=Strongly Agree/Always)

1.\_\_\_\_\_ I collect and examine school data to identify program goals and monitor student progress.

1-Never 2-Rarely 3-Sometimes 4-Often 5-Always

2.\_\_\_\_\_ I identify ASCA Mindsets & Behaviors for the core curriculum, small group and closing the gap activities I provide.

1-Never 2-Rarely 3-Sometimes 4-Often 5-Always

3.\_\_\_\_\_ The needs of my students determine how I plan my day.

1-Strongly disagree 2-Disagree 3-Unsure 4-Agree 5-Strongly agree

4.\_\_\_\_\_ I consider the school improvement plan when developing my program goals.

1-Strongly disagree 2-Disagree 3-Unsure 4-Agree 5-Strongly agree

5.\_\_\_\_\_ I maintain a weekly and annual calendar that I share with faculty and staff.

1-Strongly Disagree 2-Disagree 3-Unsure 4-Agree 5-Strongly Agree

6.\_\_\_\_\_ I collect data about my program SMART goals.

1-Never 2-Rarely 3-Sometimes 4-Often 5-Always

7.\_\_\_\_\_ I provide direct and indirect services to my students 80% of the time or more.

1-Strongly disagree 2-Disagree 3-Unsure 4-Agree 5-Strongly agree

8.\_\_\_\_\_ I create high quality perception data assessment surveys driven by ASCA Mindsets &

Behaviors to measure change in student attitudes, knowledge and/or skills.

1-Never 2-Rarely 3-Sometimes 4-Often 5-Always

9.\_\_\_\_\_ I know the difference among process, perception and outcome data.

1-Strongly disagree 2-Disagree 3-Unsure 4-Agree 5-Strongly agree

10.\_\_\_\_\_ I am able to meet the challenges I face at my school.

1-Strongly disagree 2-Disagree 3-Unsure 4-Agree 5-Strongly agree

11.\_\_\_\_\_ I share the results of data I collect with stakeholders (i.e., administrators, teachers, parents, students).

1-Never 2-Rarely 3-Sometimes 4-Often 5-Always

12.\_\_\_\_\_ I have conducted an ASCA Use of Time assessment in the last two years.

1-Strongly disagree 2-Disagree 3-Unsure 4-Agree 5-Strongly agree

13.\_\_\_\_\_ I conduct short term individual counseling and crisis counseling as needed.

1-Never 2-Rarely 3-Sometimes 4-Often 5-Always

14.\_\_\_\_\_ I have identified 2-3 SMART program goals this school year.

1-Strongly disagree 2-Disagree 3-Unsure 4-Agree 5-Strongly agree

15.\_\_\_\_\_ I conduct or plan to conduct small group counseling this school year.

1-Strongly disagree 2-Disagree 3-Unsure 4-Agree 5-Strongly agree

16.\_\_\_\_\_ I provide developmentally appropriate career and college access core curriculum activities each school year.

1-Strongly disagree 2-Disagree 3-Unsure 4-Agree 5-Strongly agree

17.\_\_\_\_\_ I am a leader at my school.

1-Strongly disagree 2-Disagree 3-Unsure 4-Agree 5-Strongly agree

18.\_\_\_\_\_ I feel energized by my work as a school counselor.

1-Strongly disagree 2-Disagree 3-Unsure 4-Agree 5-Strongly agree

19.\_\_\_\_\_ I have evidence that my school counseling program is creating change for my students.

1-Strongly disagree 2-Disagree 3-Unsure 4-Agree 5-Strongly agree

20.\_\_\_\_\_ I collaborate with my school administrator to align my school counseling role with the ASCA National Model.

1-Strongly disagree 2-Disagree 3-Unsure 4-Agree 5-Strongly agree

21.\_\_\_\_\_ I have a signed annual agreement that outlines my duties and responsibilities.

1-Strongly disagree 2-Disagree 3-Unsure 4-Agree 5-Strongly agree

22.\_\_\_\_\_ I have a core curriculum, small group and closing-the-gap action plan that identifies the lessons I provide.

1-Strongly disagree 2-Disagree 3-Unsure 4-Agree 5-Strongly agree

23.\_\_\_\_\_ I work closely with teachers and believe that I have their trust.

1-Strongly disagree 2-Disagree 3-Unsure 4-Agree 5-Strongly agree

24.\_\_\_\_\_ I/we hold School Counseling Advisory Council meetings twice a year.

1-Never 2-Rarely 3-Sometimes 4-Often 5-Always

25.\_\_\_\_\_ My program is RAMP or, I am/we are considering applying for RAMP.

1-Strongly disagree 2-Disagree 3-Unsure 4-Agree 5-Strongly agree

TOTAL:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Add up your score and turn the page to see what practice level best describes your practices.