



**Supervisor Checklist for Assessment of Prior Learning**

Applicant Name:

Supervisor Name:

Supervisor email:

Supervisor phone number:

This checklist is part of the application process for interns to receive assessment of prior learning. Please score each competency between 1 and 4 and provide your contact information. The DI Director may contact you with questions.

- 4= Exceptional
- 3= Proficient
- 2= Needs Improvement
- 1= Unacceptable
- N/A = not applicable or not observed

Competency	Score (1-4)
1. Demonstrate active participation, teamwork and contributions in group settings. (2.3)	
2. Function as a member of interprofessional teams. (2.4)	
3. Work collaboratively with NDTRs and/or support personnel in other disciplines. (2.5)	
4. Refer clients and patients to other professionals and services when needs are beyond individual scope of practice. (2.6)	
5. Apply change management strategies to achieve desired outcomes. (2.7)	
6. Demonstrate negotiation skills. (2.8)	
7. Demonstrate professional attributes in all areas of practice. (2.10)	
8. Show cultural consideration and humility in interactions with colleagues, staff, clients, and the public. (2.11)	
9. Develop and deliver products, programs or services that promote consumer health, wellness and lifestyle management. (3.11)	
10. Deliver respectful, science-based answers to client questions concerning emerging trends. (3.12)	
11. Apply current information technologies to develop, manage and disseminate nutrition information and data. (4.4)	
12. Analyze risk in nutrition and dietetics practice (such as risks to achieving set goals and objectives, risk management plan, or risk due to clinical liability or foodborne illness). (4.10)	
13. Advocate for opportunities in professional settings (such as asking for additional responsibility, practicing negotiating a salary or wage or asking for a promotion). (5.4)	
14. Demonstrate the ability to resolve conflict. (5.5)	
15. Promote team involvement and recognize the skills of each member. (5.6)	

If you have additional comments, please include them here:

Supervisor Signature:

Date: