



Internship Evaluation Form

Student Intern: _____

Company: _____

Supervisor: _____

Phone: _____ Date: _____

Briefly explain/describe the job performed by the student:

Rate the following items (select one, 5 is the highest rating):

1. How quickly did the student gain competency? 1 2 3 4 5

Comments:

2. How much self-motivation did the student exhibit? 1 2 3 4 5

Comments:

3. How well did the student complete work in a timely manner? 1 2 3 4 5

Comments:

4. How well did the student fulfill the requirements and skills of the job? 1 2 3 4 5

Comments:

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5. What problem solving/decision making skills were identified and enhanced during the internship?

6. What technical skills were gained or enhanced during the internship?

7. What academic and/or work related recommendations do you have for the student?

8. Additional Comments:

Business Supervisor Signature

Date

Student Signature

Date

Academic Supervisor Signature

Date

Program Chair/Director Signature

Date