School of Interdisciplinary Informatics - Internship Evaluation Form

Student Intern: _______________________________________________________________

Company: ............................................................................................................

Supervisor: .........................................................................................................

Phone: ____________________________ Date: ____________________________

Briefly explain/describe the job performed by the student:

Rate the following items (Circle 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