

**Internship Site Supervisor’s Evaluation Form**

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| Student Name:  Report Date:  Internship Duration: / /201 **to** / /201 | Employer:  Supervisor Name:  Supervisor Title: |

**To the Supervisor:**

Please confidentially complete this form to evaluate the student’s performance. The signed and sealed form in a sealed envelope should be sent to the department via post office or the student.

**GRADING SCALE:**

**Excellent (4):** Greatly exceeded the standard

**Above Average (3):** Exceeded the standard

**Average (2):** Met the standard

**Below Average (1):** Did not meet the standard

**Unsatisfactory (0):** Significantly below the standard

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| **EVALUATION TOPICS** | | **4** | **3** | **2** | **1** | **0** |
| **PLANNING & ORGANIZING**  Extent of planning, organizing and time management skills | |  |  |  |  |  |
| **LEARNING**  Ability to assimilate, comprehend and apply new information | |  |  |  |  |  |
| **INTEREST IN WORK**  Amount of enthusiasm and pride toward work assignments | |  |  |  |  |  |
| **PROBLEM SOLVING**  Degree of problem solving abilities | |  |  |  |  |  |
| **INTERPERSONAL RELATIONS & ADAPTATION TO ORGANIZATON**  Ability to interact and work with others in effective manner  Response to supervision, standards and policies | |  |  |  |  |  |
| **TOTAL GRADE** |  | | | | |

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| **SUPERVISOR’S COMMENTS**  Briefly summarize the performance and comment on the student’s strengths and areas for improvement. | |
| **Date:** | **Supervisor Signature:** |