

## EMPLOYER EVALUATION OF INTERNSHIP EXPERIENCE

*Note: In the interest of learning and professional development, the employer should review this completed form with the intern at the end of the internship. Please return this form to the student as it is a required part of their internship packet.*

### STUDENT INFORMATION – completed by employer

Name: \_\_\_\_\_ Job Title: \_\_\_\_\_

Major: \_\_\_\_\_ Total Hours Worked on Internship: \_\_\_\_\_

### EVALUATION OF IUPUI INTERNSHIP PROGRAMS

In your opinion, how effective was the IUPUI internship program?

	Excellent	Good	Average	Below Average	Poor	Not Applicable
A. Internship posting system (If you used an IUPUI posting system to find this intern, please rate its effectiveness.)	5	4	3	2	1	N/A
B. Academic preparation of student (Did this intern have the basic and technical skills required to effectively perform the duties you assigned?)	5	4	3	2	1	N/A
C. Overall satisfaction with the experience (Would you recommend the IUPUI internship program to other employers?)	5	4	3	2	1	N/A
D. Future Interns (Would you like the Internship Coordinator to contact you about having another IUPUI intern in this position?)	Yes _____		No _____			

### EVALUATION OF STUDENT'S PROFESSIONAL DEVELOPMENT

In your opinion, how well was the student able to learn and utilize the following skills during the internship?

	Excellent	Good	Average	Below Average	Poor
A. Interpersonal Relations (communication with co-workers, ability to work with others on projects)	5	4	3	2	1
B. Judgement (ability to make professional decisions)	5	4	3	2	1
C. Dependability: (punctuality, reliably completed tasks, worked assigned hours/days)	5	4	3	2	1
D. Learning Ability (how quickly they learned new tasks)	5	4	3	2	1
E. Quality of Work (projects and tasks completed with attention to details, works independently and as team-player, few errors in work)	5	4	3	2	1
F. Overall Performance	5	4	3	2	1

Employer's Signature: \_\_\_\_\_ Date: \_\_\_\_\_