

## STUDENT EVALUATION OF INTERNSHIP EXPERIENCE

### STUDENT INFORMATION

Name: \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_  
                                 Street    City    State    Zip Code

Phone: \_\_\_\_\_ Internship was: \_\_\_\_\_ For Credit \_\_\_\_\_ Non-Credit

Major: \_\_\_\_\_

### EVALUATION OF INTERNSHIP SITE

In your opinion, how effective was your internship site?

	Excellent	Good	Average	Below Average	Poor
A. Assignments (quantity, relevance to career goals)	5	4	3	2	1
B. Accessibility of supervisor (available for feedback, met with you regularly, provided quality training)	5	4	3	2	1
C. Opportunity to learn new skills (given responsibility, cross-trained on additional duties)	5	4	3	2	1
D. Overall satisfaction with the experience (would you recommend this internship to other students)	5	4	3	2	1

### EVALUATION OF STUDENT'S PROFESSIONAL DEVELOPMENT

In your opinion, how well were you able to learn and utilize the following skills during your 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 you 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

Student's Signature: \_\_\_\_\_ Date: \_\_\_\_\_