

SUPERVISOR EVALUATION OF STUDENT INTERN

Student: Name:

Supervisor Name and Title:

Term of Internship (circle one): **Fall** **Winter** **Spring** **Summer**

1. Preparation: Please describe the extent to which the intern was prepared for this internship project or task in terms of academic background and appropriate skills. Note areas where the intern excelled as well as any areas where the intern would benefit from additional training or study.

2. Performance: Comment on the quality and quantity of the intern’s work. For example, was the project or task completed on time and according to agreed-upon standards? Please provide feedback about the student’s professional conduct during the internship including dependability, ability to communicate effectively, willingness to work cooperatively, willingness to learn and follow organizational protocol, etc.

3. Any additional helpful feedback for the intern:

Supervisor Signature: _____

Date: