

## EVALUATION OF STUDENT INTERN

Student \_\_\_\_\_ Date \_\_\_\_\_

Employer or Institution \_\_\_\_\_

Address \_\_\_\_\_

Person Contacted \_\_\_\_\_

**RATING** (Faculty Coordinator assesses student's performance from interview with employer and student. Any deficient areas should be noted with recommendations/interventions for correction.)

Assessment	Superior	Satisfactory	Needs Improvement
Attendance			
Punctuality			
Appearance			
Attitude			
Quality of Work			
Meeting Learning Objectives			
Interpersonal Skills			
Sense of Responsibility			
Overall Performance			
Maintaining Log			

**COMMENTS:**

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Faculty Coordinator: \_\_\_\_\_

