# APPENDIX D – INTERN EVALUATION BY EMPLOYER

**INTERN EVALUATION BY EMPLOYER**

(To be completed by Site Supervisor during the final week of the internship experience.)

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| **EVALUATION OF (NAME OF INTERN):** NAME OF INTERN  | **EVALUATION PERIOD (DURATION OF INTERNSHIP):**START DATE **TO** END DATE  |
| **NAME OF EVALUATOR:**NAME OF EVALUATOR | **NAME AND ADDRESS OF COMPANY:**NAME OF COMPANYADDRESS 1ADDRESS 2CITY, ST ZIP CODE |
| **THIS INTERN EVALUATION SERVES TWO PURPOSES:****(1) a tool for evaluating the internship experience and****(2) as professional feedback to the intern regarding their performance. It is recommended that you review the results of this evaluation with the intern before sending it to the Internship Coordinator.** |
| Please return the evaluation to the Internship Coordinator:**THANK YOU FOR YOUR INVOLVEMENT****WITH THE BHSU – CAREER DEVELOPMENT INTERNSHIP PROGRAM.****IF WE CAN BE OF SERVICE TO YOU IN THE FUTURE, PLEASE LET US KNOW BY EMAILING CAREERS@BHSU.EDU.** |

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| **A. ATTITUDE** |
| [ ]  Not cooperative. Negative response to supervision. [ ]  Reasonably interested in job. Makes an occasional suggestion. Performs as directed. [ ]  Intense interest in job. Possesses leadership qualities; generates enthusiasm in others. [ ]  Receptive to new ideas. Alert for the opportunity to improve work procedures. [ ]  Indifferent approach to job. Does only what is required.  | **COMMENTS:** |
| **B. KNOWLEDGE OF JOB**  |
| [ ]  Limited knowledge. Considerable supervision required. [ ]  Handles assignments with partial assistance. Frequent instructions required.[ ]  Capably handles all usual job situations. Knowledgeable and productive. [ ]  Capable of instructing others. Has good supervisory skills. [ ]  Completes daily work satisfactorily. Occasional direction required.  |  **COMMENTS:**  |
| **C. JUDGMENT**  |
| [ ]  Unpredictable. Cannot make decisions or makes decisions based on emotions. [ ]  Good judgment. Decisions can be relied on. [ ]  Usually makes sound decisions. Could improve with experience. [ ]  Decisions not always sound. Immature. [ ]  Sound judgment. Clear thinker under pressure. Decisions respected and frequently sought by fellow employees.  | **COMMENTS:**  |

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| **D. CAPABILITY TO LEARN**  |
| [ ]  Must repeat instructions in general. Work must be checked occasionally. Learns less readily than most. [ ] Outstanding ability to comprehend instructions and new ideas, and to retain what has been learned. [ ] Learns fast. Retains most of what had been learned. [ ] Must repeat instructions in detail and check work frequently. Learns slowly. [ ] Quick to learn. Asks intelligent questions. Retains knowledge.  | **COMMENTS:** |
| **E. HUMAN RELATIONS**  |
| [ ]  Adequate relations with customers and associates. Cooperative.[ ]  Courteous. Friendly. Has poise and dignity. Well accepted by customers and associates. [ ]  Abrupt. Lacks poise. Not responsive to public and/or associates.[ ]  Antagonistic. Self-centered. Lacks tact.[ ]  Dynamic personality. Influences others and is respected by associates and customers. | **COMMENTS:** |
| **F. APPEARANCE**  |
| [ ]  Exceptional[ ]  Above standard[ ]  Acceptable[ ]  Below standard[ ]  Not acceptable | **COMMENTS:** |
| **G. WHAT HAVE BEEN THE INTERN'S PRIMARY DUTIES DURING THIS EVALUATION PERIOD?**         |
| **H. OVERALL, IN WHAT SKILLS OR TRAITS DOES THE INTERN SEEM STRONGEST?**        |
| **I. OVERALL, IN WHAT AREA(S) DOES THE INTERN NEED IMPROVEMENT?**       |
| **J. DURING THIS PERIOD, WHAT NEW SKILLS OR TASKS HAS THE INTERN LEARNED?**     |
| **K. DO YOU BELIEVE THE INTERN HAS SATISFACTORILY FULFILLED HIS/HER OBLIGATIONS TO YOU AS SITE SUPERVISOR?** [ ] **YES** [ ]  **NO (IF “NO”, PLEASE COMMENT.)** |
| **L. PLEASE COMMENT ON HOW THE STUDENT DEMONSTRATED IMPACT, INNOVATION, AND ENGAGEMENT WITH THIS INTERNSHIP.**   |
| **NAME/TITLE OF EVALUATOR:**  NAME OF EVALUATOR TITLE OF EVALUATOR**SIGNATURE OF EVALUATOR:**    | **DATE OF EVALUATION:** SELECT DATE OF EVALUATION |