EMPLOYER EVALUATION OF STUDENT INTERN

Student: ___________________________ Student ID: ________________

Employer: ____________________________

Supervisor: ___________________________ Supervisor Phone Number: __________

This evaluation is an important measure of the intern student’s personal and professional development. Your objective evaluation can assist the student in developing successful work habits, as well as assist Career Development Center.

Under the provisions of the Family Educational Rights Privacy Act of 1974, each student has an opportunity to examine official documents and records pertaining to him/her, and to request copies of them. It is a preferable that this evaluation be completed jointly, in the presence of the student. Upon completion, please return this evaluation to our office.

1. Briefly describe the duties assigned to the student.
   A. 
   B. 
   C. 
   D. 

2. What strengths did the student demonstrate in this position?

3. What are the student’s major professional and developmental needs?

Please rate the student’s performance in the following areas:

<table>
<thead>
<tr>
<th></th>
<th>Excellent</th>
<th>Poor</th>
</tr>
</thead>
<tbody>
<tr>
<td>Interest and enthusiasm for work</td>
<td>5 4 3 2 1</td>
<td></td>
</tr>
<tr>
<td>Ability to perform tasks assigned</td>
<td>5 4 3 2 1</td>
<td></td>
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<tr>
<td>Ability to learn new tasks</td>
<td>5 4 3 2 1</td>
<td></td>
</tr>
<tr>
<td>Dependability</td>
<td>5 4 3 2 1</td>
<td></td>
</tr>
<tr>
<td>Quality of Work</td>
<td>5 4 3 2 1</td>
<td></td>
</tr>
<tr>
<td>Quantity of Work</td>
<td>5 4 3 2 1</td>
<td></td>
</tr>
<tr>
<td>Ability to make decisions</td>
<td>5 4 3 2 1</td>
<td></td>
</tr>
<tr>
<td>Ability to work well with others</td>
<td>5 4 3 2 1</td>
<td></td>
</tr>
<tr>
<td>Ability to work independently</td>
<td>5 4 3 2 1</td>
<td></td>
</tr>
<tr>
<td>Attendance</td>
<td>5 4 3 2 1</td>
<td></td>
</tr>
<tr>
<td>Punctuality</td>
<td>5 4 3 2 1</td>
<td></td>
</tr>
</tbody>
</table>
4. What have you observed regarding this student’s communication skills?

   Verbal ability: _____ Superior    _____ Effective    _____ Needs Improvement

   Comments:

   Writing ability: _____ Superior    _____ Effective    _____ Needs Improvement

   Comments:

5. What traits have you observed that may help this student’s professional advancement?

6. What traits have you observed that may hinder this student’s professional advancement?

   Overall Performance: _____ Outstanding    _____ Very Good    _____ Average

   _____ Marginal    _____ Unsatisfactory

   Additional Comments:

Comments by Student:

____________________________________

Date: ______________________

Supervisor’s Signature

____________________________________

Date: ______________________

Student’s Signature