

Evaluation Form

This form is necessary for the student to receive his/her final grade.

Intern's Name _____

Organization _____

To assist in the continued development of the Intern, we ask that the supervising employer complete this form and the Internship Evaluation Continuum no later than the final week of the semester. The value of the work experienced depends on good communication and coordination between supervisor and student. **We ask that you discuss your evaluation with the student.**

1. How well did the Intern perform his/her internship duties and responsibilities?
2. What opportunities were there for the Intern to use his/her academic training in this internship?
3. How did the Intern relate to the co-workers and superiors?
4. Please identify the Intern's strengths in terms of skills needed for this internship.
5. Identify the Intern's limitations in terms of skills needed for this internship.
6. What further skills and/or training should this Intern develop?

Notre Dame de Namur University
School of Business and Management
Internship Program

Evaluation Continuum

This form is shared with the intern. Please place an X in the appropriate box that best describes the Intern's performance.

Intern's Name _____

Organization _____

	Needs Improvement		Average		Above Average	
	1	2	3	4	5	6
Attendance						
Promptness						
Dependability						
Initiative						
Quality of work						
Ability to work independently						
Communication skills						
Assertiveness						
Ability to relate well to others						
Problem solving ability						
Decision making ability						
Overall professionalism						

Supervisor's Name: _____

Supervisor's Signature: _____

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Anonymous and Confidential Supervisor's Evaluation

Thank you for supervising a Notre Dame de Namur University student intern in your organization. You have provided an invaluable service. To help evaluate the adequacy of our program, please answer the following questions regarding your intern and the Internship Program. **This information will not be communicated to the student intern**, but will be used to help assess the strengths and weaknesses in our curriculum.

Please return this form in one of the following two ways. 1) Place in an envelope, seal it, sign your name across the seal and give to the intern. Or 2) Mail the form to Dr. Sujata Verma, School of Business and Management, 1500 Ralston Avenue, Belmont, CA 94002.

1. How well did the Intern fulfill his or her responsibilities?

2. What academic strengths did the Intern bring to the job?

3. What were the deficits in the Intern's training and preparation?

4. How much supervision did your Intern need to ensure adequate follow-through (please circle):

1	2	3	4	5
Needed Constant Reminding				Highly Self Motivated

5. Will you consider having another student intern from NDNU? Why or why not?

6. Did NDNU staff or faculty visit your site? If not, do you think a site visit would have been beneficial?

7. How can we improve the Internship Program?

Additional Comments:

Thank you again for your participation in our program!