Final Internship Evaluation Form: Employer

Completion of this form by the internship site supervisor provides a valuable, objective evaluation of the student's abilities, characteristics, and growth, and it identifies areas requiring improvement. Please complete this form and email it to the Director of Undergraduate Studies: ageex004@umn.edu

Attitude:

___ Very enthusiastic and interested in the job
___ Shows interest most of the time
___ Somewhat indifferent
___ Definitely not interested

Dependability:

___ Completely reliable in following instructions
___ Meets obligations with little need for supervision
___ Requires careful supervision
___ Requires frequent follow-up on routine duties
___ Unreliable even under close supervision

Work Initiative:

___ Recognizes work to be done and does it without directions
___ Does more than is assigned
___ Does average amount of assigned work
___ Sometimes tries to avoid work
___ Low production, unreliable

Cooperation:

___ Good team worker, well accepted, tactful
___ Works well with others
___ Gets along satisfactorily
___ Has difficulties working with others
___ Unfriendly, rude, hard to get along with

Quality of Work:

___ Always does neat, accurate work
___ Usually produces high quality work
___ Produces acceptable work
___ Usually produces inferior work
___ Does almost no acceptable work

Attendance and Punctuality:

___ Never late or absent
___ Very seldom absent or tardy
___ Late or absent several times
___ Attendance and punctuality was a problem

Adaptability:

___ Reacts very quickly to new situations
___ Easily learns new duties if given time
___ Routine worker, requires detailed instructions
___ Slow to learn and accept new changes
___ Unable to adjust to change

Progress:

___ Outstanding improvement
___ Some improvement
___ Failed to improve
___ Does inadequate work

Overall Performance:

___ Outstanding   ___ Very Good   ___ Average   ___ Marginal   ___ Unsatisfactory

Do you feel this student is qualified for full-time employment in a field related to this internship? ___ Yes   ___ No

Please comment.

__________________________________________________________________________

__________________________________________________________________________

Suggestions for improving the internship.
__________________________________________________________________________

__________________________________________________________________________

This report has been discussed with the student. ___ Yes   ___ No

__________________________________________________________________________

Internship Site Supervisor’s Signature   Date