Final Internship Evaluation Form: Student

Please provide an evaluation of your internship experience by completing this form and emailing it to the Director of Undergraduate Studies: ageex004@umn.edu

Name ___________________________________________ Internship Dates: Begin ___________ End ___________

Employer ________________________________________ Internship Supervisor ________________________________

Employer Address: ________________________________

Job Title: (if any) ___________________________ Internship Location: ________________________________

Travel required: Yes ____ No ___ Paid ___ Unpaid ___ Other Benefits: ________________________________

1. Briefly describe the tasks you undertook during this internship. _______________________________________

__________________________________________________________________________________________

__________________________________________________________________________________________

2. How valuable was this work experience to you in the following areas? (Rate on 1-5 scale: 1=no value, 5=very valuable)
   ____ Helping you decide on a future career (in this area or a different area)
   ____ Providing insight into your employer’s business or operation
   ____ Learning new skills or techniques
   ____ Applying, integrating, and/or making relevant the knowledge gained from your courses
   ____ Clarifying your future educational goals

3. List the courses and/or leadership opportunities both within and outside of the College of Design that best prepared you for this work experience.

   College of Design Courses/Leadership Opportunities: ____________________________________________

   Other Courses/Leadership Opportunities: _____________________________________________________

4. What were the strengths of this internship? The highlights? ________________________________________

   _______________________________________________________________________________________

   _______________________________________________________________________________________

5. How could your internship have been improved? ________________________________________________

   _______________________________________________________________________________________

   _______________________________________________________________________________________

6. Would you recommend this site to other students? Yes ___ No ___

   Why or why not? _________________________________________________________________________

   _______________________________________________________________________________________

7. Would you be willing to talk to other students about this internship? Yes ___ No ___

   If yes, please provide your email and/or phone number. ________________________________________