# INTERN EVALUATION FORM #1 or #2 for

**▲ (please check one) ▲ (name of Intern)**

**Thank you for your support of our Internship Program!** Please evaluate each area by circling the most appropriate rating and list any comments you may have. If additional space is needed, please use the back of this form. This evaluation will help determine almost one-half of the student's grade.

**Major Duties Highest Satisfactory Lowest**

##

**5 4 3 2 1**

1.
2.

## Comments\_

Attitude: 5 4 3 2 1

[Comments\_](#_TOC_250000)

Attendance: 5 4 3 2 1

Comments\_

**Areas of Improvement**: Please identify 2 or 3 areas in which the student could improve:

**Overall Rating for Internship: A B C D F**

## Comments

**Total hours worked on internship:** From to

**Supervisor’s Signature Intern’s Signature**

**Date Company Name**