

(INSERT FACULTY NAME) INTERNSHIP PROGRAM

| Student Name: | | | Student Number: | | | | | | | | |
|---|---|--|-----------------|--------------------------|--|--|--------|----------|---------|---|--|
| Company: | | | Location: | | | | | | | | |
| Job Title: | | | | | | | | | | | |
| Internship Period: / / to / / | | | / | Length in months: 4 8 12 | | | | 16 | | | |
| Supervisor Name: | | | | Phone Number: | | | | | | | |
| | | | | | | | Email: | | | | |
| | | | | | | | | | | | |
| FINAL EVALUATION | | | | | | | | | | | |
| Please use the following questions to evaluate the student's performance during their internship. | | | | | | | | | | | |
| Learning Out | _ | | | | | | · | | | · | |
| _ | | | | | | | | | | | |
| | 1. What strongths are the student display during the internship: | | | | | | | | | | |
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| | | | | | | | | | | | |
| 2. Which | Which areas of performance would benefit from continued development? | | | | | | | | | | |
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| | Please comment on the student's achievement of the learning outcomes developed at the the internship. | | | | | | | at the s | tart of | | |
| | | | | | | | | | | | |
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| 4. | Did the student encounter any obstacles or challenges during the internship? If yes, how did this impact the student's ability to achieve the learning outcomes developed at the start of the internship? | | | | | | | | |
|--------------------------------|---|--------|--------|-------|-------|--------|----------------------------|--|--|
| | | | | | | | | | |
| <u>Gener</u> | ral Performance | | | | | | | | |
| Please | e rate the student's performance | in the | e cate | gorie | es be | low, ı | using the following scale: | | |
| A = E | A = Excellent B = Very Good | | | Avera | ge | | D = Fair E = Poor | | |
| Perfo | ormance Graded | A | В | С | D | E | Comments (if applicable) | | |
| Unde | erstanding of new concepts | | | | | | | | |
| Skill I | level attained | | | | | | | | |
| Quali | ity of work | | | | | | | | |
| Profe | essionalism | | | | | | | | |
| Initiat | tive | | | | | | | | |
| Orga | nization and planning | | | | | | | | |
| Judge | ement | | | | | | | | |
| Relia | bility | | | | | | | | |
| Colla | boration with others | | | | | | | | |
| Comr | munication skills (oral) | | | | | | | | |
| Communication skills (written) | | | | | | | | | |
| Over | all Performance Rating | | | • | • | | | | |

| 5. | Have you discussed this evaluation with the student? | | | | | | | | | |
|--------|--|----------------------|---|---------------------------|--|--|--|--|--|--|
| | \square Yes, I have discussed/plan to discuss this evaluation with the student | | | | | | | | | |
| | ☐ No (please provid | de reasoning below): | | | | | | | | |
| | | | | | | | | | | |
| 6. | 6. Please rate your overall satisfaction with the support provided by the University: | | | | | | | | | |
| | ☐ Very satisfied | ☐ Satisfied | ☐ Unsatisfied | ☐ Very unsatisfied | | | | | | |
| 7. | 7. Will you consider hiring students through Western's Internship Program in the future? Why or why not? | | | | | | | | | |
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| | - | | nent below, and submit your il at (insert email address). | completed document to the | | | | | | |
| | | Signature | | Date | | | | | | |
| Intern | ship Supervisor: | | | | | | | | | |