Roanoke College Site Supervisor Internship Evaluation Form

Please return this form to: Professor Sharon Gibbs via email at sgibbs@roanoke.edu, by fax at 540-375-2577, or directly to office West Hall 101.

**Company/Organization: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Intern’s Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

## Supervisor’s Name and Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Dates of Internship:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

The purpose of the Site Supervisor Intern Assessment is to provide the internship director substantive feedback regarding the student’s performance and growth in the internship experience. You are requested to be objective and candid in your responses. It is also suggested to make your assessment a growth experience by discussing it directly with the intern.

***Please respond to the following questions regarding your experience with your intern compared with other college student interns.***

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Intern’s Performance** | N/A | Needs Improvement | **Satisfactory** | AboveAverage | Exceptional |
| Understands assignments/seeks clarification if  Needed. |  |  |  |  |  |
| Completes assignments on time. |  |  |  |  |  |
| Produces quality work. |  |  |  |  |  |
| Applies academic knowledge and skills.  |  |  |  |  |  |
| Ability to solve problems. |  |  |  |  |  |
| Accepts responsibility for his or her work. |  |  |  |  |  |
| Displays effective written communication skills. |  |  |  |  |  |
| Displays effective oral communication skills. |  |  |  |  |  |
| Demonstrates creativity in approaching tasks. |  |  |  |  |  |
| Works well as a team player. |  |  |  |  |  |
| Open to new challenges and experience. |  |  |  |  |  |
| Ability to think critically. |  |  |  |  |  |

**Comments on intern’s performance:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Intern’s Attitude and Work Habits** | N/A | Needs Improvement | **Satisfactory** | AboveAverage | Exceptional |
| Is self-motivated. |  |  |  |  |  |
| Enthusiastic in carrying out responsibilities. |  |  |  |  |  |
| Meets attendance requirements (120 hours). |  |  |  |  |  |
| Is prompt in showing up to work and meetings.  |  |  |  |  |  |
| Dresses appropriately. |  |  |  |  |  |
| Acts professionally. |  |  |  |  |  |
| Respects others.  |  |  |  |  |  |
| Maintains confidentiality with sensitive information and situations. |  |  |  |  |  |
| Accepts constructive criticism and advice. |  |  |  |  |  |
| Behaves in an ethical manner. |  |  |  |  |  |
| Responds in a timely manner to requests.  |  |  |  |  |  |
| Shows flexibility.  |  |  |  |  |  |

**Comments on intern’s attitude and work habits:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Intern’s Ability and Skill** | N/A | Needs Improvement | **Satisfactory** | AboveAverage | Exceptional |
| To give presentations. |  |  |  |  |  |
| To present information in writing. |  |  |  |  |  |
| To work in a team |  |  |  |  |  |
| To critically evaluate, analyze, and interpret information to solve problems |  |  |  |  |  |
| To make business decisions |  |  |  |  |  |
| To understand the global and external forces that impact one’s decisions |  |  |  |  |  |

**What do you perceive to be this intern’s strengths?**

**What would make the intern more job-worthy? That is, how could this intern improve to better qualify for a job in this field?**

**The internship focused mostly in (please check):**

€ Accounting € Finance € Management Science € Information Systems € Marketing € Management

|  |  |  |  |
| --- | --- | --- | --- |
| Would you supervise this intern again? |  |  |  |
| Would your organization host this intern again? |  |  |  |
| Would you recommend this student to other organizations? |  |  |  |
| Would you supervise other Roanoke College Interns? |  |  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **OVERALL PERFORMANCE OF THIS INTERN** | Needs Improvement | **Satisfactory** | AboveAverage | Exceptional |

|  |
| --- |
| *\_\_\_\_\_ I have \_\_\_\_\_ I have not discussed this assessment with the intern. (Please check one)**I give permission for the director to share this form to my student intern ­­\_\_\_\_\_\_\_\_\_\_Yes \_\_\_\_\_\_\_\_\_NO* |

*Please attach an additional sheet to describe your perception of the overall quality and value of this internship experience (Optional).*

Supervisor’s Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Supervisor’s Contact Information\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(phone) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(email)

Thank you for evaluating our student!