

SEMESTER \_\_\_\_\_ DUE BY \_\_\_\_\_ TODAY'S DATE \_\_\_\_\_

## SFCM INTERNSHIP EVALUATION FORM: HOST ORGANIZATION

At the end of each semester, the Student Intern and Host Organization must submit completed Evaluation Forms to the PDEC. We hope that this has been a mutually productive experience and look forward to further opportunities to work together. If you have any additional comments, please let us know.

### HOST ORGANIZATION

NAME OF HOST ORGANIZATION

ON-SITE SUPERVISOR / CONTACT PERSON

CONTACT TITLE

ADDRESS

CITY

STATE

ZIP

PHONE

EXT.

EMAIL

ORGANIZATION WEBSITE

INTERN POSITION TITLE

### STUDENT INTERN

LAST NAME

FIRST NAME

ADDRESS

CITY

STATE

ZIP

PHONE

SFCM EMAIL

*(continues on other side)*

## INTERNSHIP EVALUATION

1. List principal activities your intern performed during this internship:

A.

B.

C.

D.

2. Evaluate your intern in the following areas:

	Excellent	Good	Average	Fair
Responsibility				
Initiative				
Reception to Criticism				
Overall Development				
Interaction with Environment				

3. Note any problems, issues, and resolutions encountered during the internship period:

4. How did the use of an intern affect the way you or your organization carried out your work?

5. If this was your first use of an intern, how did the experience compare with your expectations?

6. If you have had an intern before, how did this placement compare with previous intern experiences?

7. How would you evaluate this internship? ☐ Excellent ☐ Good ☐ Average ☐ Poor

Strongest Points:

Weakest Points:

8. What can the PDEC do to improve the Internship Program?