Student\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Internship Period: Interim (January Term) 2014

Organization\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Internship Supervisor\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Faculty Sponsor \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Please Submit to Internship Director by January 31, 2014**

|  |  |  |
| --- | --- | --- |
| *Check the appropriate rating* | | *Additional Comments* |
| Relations With Others | \_\_\_Interacts well  \_\_\_Gets along satisfactorily  \_\_\_Has difficulty  \_\_\_Interacts poorly |  |
| Judgment | \_\_\_Above average decision-making s  \_\_\_Usually makes the right decision  \_\_\_Often uses poor judgment  \_\_\_Consistently uses bad judgment  \_\_\_N/A, observation experience |  |
| Ability To Learn | \_\_\_Learns Rapidly  \_\_\_Average in learning  \_\_\_Rather slow to learn  \_\_\_Very slow to learn  \_\_\_N/A |  |
| Attitude | \_\_\_Very interested and industrious  \_\_\_Average in diligence and interest  \_\_\_Somewhat indifferent  \_\_\_Definitely not interested |  |
| Dependability | \_\_\_Always dependable  \_\_\_Usually dependable  \_\_\_Sometimes neglectful or careless  \_\_\_Unreliable |  |
| quality of work | \_\_\_Excellent  \_\_\_Very Good  \_\_\_Average  \_\_\_Below Average  \_\_\_Poor  \_\_\_N/A, observation experience |  |
| Overall Rating | \_\_\_Excellent  \_\_\_Very Good  \_\_\_Average  \_\_\_Below Average  \_\_\_Poor |  |
| Attendance | \_\_\_Regular  \_\_\_Irregular |  |
| Punctuality | \_\_\_Regular  \_\_\_Irregular |  |

1. Please comment on the student’s preparation for the position, and his/her oral and written communication skills.

2. Please comment on the student’s strengths.

3. What advice would you give this student about his/her future academic training and/or personal traits and behaviors that need attention.

4. What overall comments would you make about the student’s work results and internship experience?

**Site supervisor:** *Please review this evaluation with the student before he/she leaves the internship.*

Did the intern meet the goals and objectives agreed upon for this internship? Yes/No

Are you interested in having another Gustavus intern work with you in the future? Yes/No

Has this report been discussed with the student? Yes/No

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Signature of Supervisor Completing Form Date

***Thank you for your time and assistance!***

**Please Return to:**

**Internship Program Director**

**Center for Servant Leadership**

**Gustavus Adolphus College**

**St. Peter, MN 56082-1498**

**Phone: (507) 933-7509**

**Fax: (507) 933-6337**

**Student intern:** Does the Center for Servant Leadership have your permission to release copies of this evaluation to employers who request it without your knowledge? Yes/No

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Student’s Signature Date