



FLORIDA ATLANTIC UNIVERSITY

Final Internship Evaluation: Student Feedback

Student's Name \_\_\_\_\_ Date \_\_\_\_\_

Agency \_\_\_\_\_

Agency Supervisor \_\_\_\_\_

Please use the following system to evaluate the internship, circling the appropriate number to answer each question. (Use a separate sheet for details, if necessary)

1 = Yes Definitely    2 = Yes    3 = Somewhat    4 = No    5 = Definitely Not

1. Did you enjoy your internship? If yes, what did you enjoy most? If no, please explain in detail.

YD    Y    S    N    DN
1    2    3    4    5

2. Was your internship a rewarding experience? Please explain in detail.

YD    Y    S    N    DN
1    2    3    4    5

3. Did your internship fulfill your expectations?

YD    Y    S    N    DN
1    2    3    4    5

4. Do you think you accomplished the objectives of your internship? Please explain how and to what degree each objective was met.

YD    Y    S    N    DN
1    2    3    4    5

5. Did the lines of communication remain open between you and the director of the internship program at FAU? If no, please explain the source of the difficulty.

YD    Y    S    N    DN
1    2    3    4    5

THE DOROTHY F. SCHMIDT COLLEGE OF ARTS AND LETTERS

Department of Communication

777 Glades Road, GCS 259, Boca Raton, FL 33431

tel: 561.297.3850 • fax: 561.297.2615 • www.communication.fau.edu • www.fau.edu

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6. Did the lines of communication remain open between you and your agency supervisor? If no, please explain the source of the difficulty.

<b>YD</b>	<b>Y</b>	<b>S</b>	<b>N</b>	<b>DN</b>
1	2	3	4	5

7. Did your agency supervisor provide information or advice regarding future employment opportunities? If yes, please explain.

<b>YD</b>	<b>Y</b>	<b>S</b>	<b>N</b>	<b>DN</b>
1	2	3	4	5

8. Did you have any problems during your internship that were not resolved? If so, what were they? Please explain.

<b>YD</b>	<b>Y</b>	<b>S</b>	<b>N</b>	<b>DN</b>
1	2	3	4	5

9. Was your internship structured enough? Please explain.

<b>YD</b>	<b>Y</b>	<b>S</b>	<b>N</b>	<b>DN</b>
1	2	3	4	5

10. Was your internship overly structured? If so, please explain.

<b>YD</b>	<b>Y</b>	<b>S</b>	<b>N</b>	<b>DN</b>
1	2	3	4	5

11. Would you recommend this internship to other students? Why or why not?

<b>YD</b>	<b>Y</b>	<b>S</b>	<b>N</b>	<b>DN</b>
1	2	3	4	5

12. What would you change concerning this internship?

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13. Do you have any recommendations regarding the Department Internship Program? Your feedback is helpful in the development of the program.

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14. Describe your overall performance in the internship.

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15. How do you think you could have improved your performance in your internship?

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Suggested final grade:

**A (exceptional)**

**B (superior)**

**C (average)**

**D (poor)**

**F (failure)**

**Please return this form to:**

Director of Internships  
Department of Communication  
Florida Atlantic University  
777 Glades Road, GCS 259  
Boca Raton, Florida 33431  
Phone: 561-297-3850  
FAX: 561-297-2615

This form is due by \_\_\_\_\_.

Without this form, you cannot receive credit for your internship.

**REMEMBER TO SUBMIT YOUR FINAL PROJECT BY THE ABOVE DUE DATE. SEE THE INTERNSHIP HANDBOOK FOR DETAILS ON FINAL PROJECTS.**