Final Internship Evaluation: Agency Supervisor Feedback

Student's Name ____________________________ Date ________________

Agency __________________________________________

Agency Supervisor ________________________________

Please use the following system to evaluate the intern. (If you need additional space for explanations, please write them at the end of the form.)

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

1. Has the intern made sufficient progress in the internship? Please explain.
   YD  Y  S  N  DN
   1  2  3  4  5

2. Did the student have sufficient knowledge and skills to do the projects/assignments given him/her?
   YD  Y  S  N  DN
   1  2  3  4  5

3. Have there been any particular problems encountered during the internship since the mid-term evaluation?
   YD  Y  S  N  DN
   1  2  3  4  5

4. (Answer if relevant.) Have the problems been resolved? Please explain.
   YD  Y  S  N  DN
   1  2  3  4  5

5. Do you consider this internship mutually beneficial to the intern and the agency?
   YD  Y  S  N  DN
   1  2  3  4  5
6. What do you consider to be the outstanding characteristics of the intern?

____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

7. What do you consider to be the weaknesses of the intern?

____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

8. Did the student master the objectives established for the internship? Please explain.

<table>
<thead>
<tr>
<th>YD</th>
<th>Y</th>
<th>S</th>
<th>N</th>
<th>DN</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
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</table>

With your above responses in mind and the following point system as a guide, please assign the student a point total of 0-50 for his or her total performance at the internship.

A   = 47-50
A-  = 45-46
B+  = 44
B   = 42-43
B-  = 40-41
C+  = 39
C   = 37-38
C-  = 35-36
D+  = 34
D   = 32-33
D-  = 30-31
F   = 29-0

Final point total assigned by supervisor ________________

9. Do you have any recommendations regarding the Department Internship Program? We are very interested in the development of our program and your recommendations are appreciated.

____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

____________________________________________________________________________________
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____________________________________________________________________________________
Please FAX this form to:

954-762-5122
Eric Freedman, Director of Internships
School of Communication and Multimedia Studies
Florida Atlantic University

This form is due by April 24 at 5:00pm.
Without this form, the student cannot receive credit for his/her internship.