Student's Name ___________________________ Date __________________

Internship Semester _______________________

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.
   
   YD  Y  S  N  DN
   1  2  3  4  5

____________________________________________________________________________________

____________________________________________________________________________________

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____________________________________________________________________________________

2. Was your internship a rewarding experience?

   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 succeeded at your internship?

   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?

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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.

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7. Did your agency supervisor provide information or advice regarding future employment opportunities?

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8. Would you consider a post-graduation job at this company/agency?

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9. Was your internship structured enough?

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10. Was your internship overly structured?

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

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12. Did you have problems during your internship that were not resolved? Please explain.

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13. What were your internship strengths? What were your internship weaknesses?

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14. How do you think you performed overall during your internship?

____________________________________________________________________________________
____________________________________________________________________________________
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____________________________________________________________________________________

15. Do you have any recommendations regarding the internship course and its structure?

____________________________________________________________________________________
Please return this form to:

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Phone: 561-212-7446
FAX: 561-297-2615