

SUPERVISOR INTERNSHIP EVALUATION

Evaluations can provide a wonderful opportunity for feedback and growth. As the direct supervisor of our scholar, please take a few moments to complete this evaluation of his/her work performance (Please type or print in block letters). Your feedback and support of our scholar's personal and professional development is greatly appreciated.

You can return this form with your intern or, if you prefer the intern not see the contents of this evaluation, you can email it to hhsp@indiana.edu, fax it to (812) 855-8615 or mail the form to the HHSP office at:

Hudson & Holland Scholars Program
Indiana University, Bloomington
Memorial Hall West 108
Bloomington, Indiana 47405

Thank you for your support of the Hudson & Holland Scholars Program and our students. We hope to work with you again in the future.

I. General Information

Intern Name: _____

Supervisor Name: _____

Supervisor Title: _____

Agency/Organization Name: _____

Phone: (____) _____ Email: _____

Address: _____

City: _____ State: _____ Zip: _____

II. Internship Information

Start Date: ____ / ____ / ____ End Date: ____ / ____ / ____ Hours Per Week: ____ Total Hours: ____

III. Placement Expectations & Intern Performance

A. Job Functions

Please list the daily activities/responsibilities required of this position:

_____	_____
_____	_____
_____	_____

Were daily responsibilities of position successfully met by intern? Yes No

If not, please explain: _____

B. Skill Sets

Please list the skill sets needed for this internship:

Did intern possess skill sets needed for this internship? Yes No

If not, please explain: _____

Please list the skill sets the intern acquired over the course of this internship:

C. Learning Objectives

As an employer, please list expected intern learning objectives and outcomes, regarding profession, professionalism, work setting, etc.

Were your expected learning objectives achieved by the intern? Yes No

If not, please explain: _____

D. Additional Information

Please evaluate the intern's strengths

Please evaluate the intern's areas for improvement and professional growth.

Please rate the intern according to the following attributes (circle the appropriate value)

How dependable was the intern concerning your work schedule?

Not Dependable

0 1 2 3 4 5 6 7 8 9

Very Dependable

10

How much initiative did the intern show?

No Initiative

0 1 2 3 4 5 6 7 8 9

Great Initiative

10

What kind of attitude did the intern exhibit toward their work?

Very Poor Attitude

0 1 2 3 4 5 6 7 8 9

Excellent Attitude

10

What kind of attitude did the intern exhibit towards coworkers?

Very Poor Attitude

0 1 2 3 4 5 6 7 8 9

Excellent Attitude

10

What kind of attitude did the intern exhibit toward authority figures?

Very Poor Attitude

0 1 2 3 4 5 6 7 8 9

Excellent Attitude

10

How would you rate the intern's appearance during the internship?

Untidy/Unkempt

0 1 2 3 4 5 6 7 8 9

Very Professional

10

How would you rate the quantity of work the intern produced?

Very Low Output

0 1 2 3 4 5 6 7 8 9

Very High Output

10

How would you rate the quality of work the intern produced?

Very Low Quality

0 1 2 3 4 5 6 7 8 9

Very High Quality

10

How would you rate the intern's progress throughout the internship?

No Progress

0 1 2 3 4 5 6 7 8 9

Quick Learner

10

How would you rate the intern's overall performance?

Very Unsatisfactory

0 1 2 3 4 5 6 7 8 9

Very Satisfactory

10

Would you be willing to write a letter of recommendation for this intern?

Yes

No

Would you consider hiring HHSP for future internships?

Yes

No

Signature: _____ **Date:** _____

FOR OFFICE USE ONLY

Thank You/Acknowledgement Sent

Date: ____ / ____ / ____

Staff Signature: _____

Notes: _____