



**INTERNSHIP EVALUATION FORM**  
**TO BE COMPLETED BY STUDENT**

To receive credit for your internship you must submit an internship evaluation, course evaluation, and intern evaluation. At the end of the semester you will submit them to Career Center ([career@fxua.edu](mailto:career@fxua.edu)).

Intern's Name: \_\_\_\_\_

Student ID: \_\_\_\_\_

Course (Code and Course Name): \_\_\_\_\_

Course Instructor: \_\_\_\_\_

Your Program of Study/Specialization (if applicable): \_\_\_\_\_

Your Internship Title: \_\_\_\_\_

Company/Organization: \_\_\_\_\_

Number of Hours Per Week: \_\_\_\_\_

How many semesters have you been on this internship site? \_\_\_\_\_

Are you an F-1 student?      YES              NO

How did you obtain this internship? (Check all that apply)

On my own

Career Center

Company/Organization's Website (provide link): \_\_\_\_\_

Friend or Family contact

Recruiter

My academic advisor

An instructor

Other (please explain): \_\_\_\_\_

**TO BE COMPLETED BY STUDENT**

Please evaluate your internship experience by circling the appropriate rating, using 1 as Poor/Unsatisfactory, 3 as Neutral, and 5 as Excellent

**INTERNSHIP EXPERIENCE OVERALL**

<b>I am satisfied with the...</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
supervision at internship site.					
opportunities to learn something new.					
opportunities to apply what I have learned in my program/course.					
guidance from academic faculty.					
process for setting up the internship.					
overall experience of the internship.					

**PRACTICAL LEARNING**

<b>I feel that the internship experience was....</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
beneficial to supplement my studies.					
an experience that will help me in pursuing opportunities after graduation.					
a good learning experience.					
a good professional development experience.					
overall practical learning experience of the internship.					

**THANK YOU!**

**Your feedback will help us improve our services and curriculum for the future!**



**COURSE EVALUATION FOR INTERNSHIP**  
**TO BE COMPLETED BY STUDENT**

To receive credit for your internship you must submit an internship evaluation, course evaluation, and intern evaluation. This evaluation is specific to the course that you took in association with our internship. Note that the university may also conduct a course-specific evaluation. Your responses below are related to the connection between your COURSE and the INTERNSHIP. At the end of the semester you will submit them (along with your hour log) to Career Center ([career@fxua.edu](mailto:career@fxua.edu)).

Intern's Name: \_\_\_\_\_ Student ID: \_\_\_\_\_

Course (Code and Course Name): \_\_\_\_\_

Course Instructor: \_\_\_\_\_

Your Program of Study/Specialization (if applicable): \_\_\_\_\_

Please evaluate your internship experience by circling the appropriate rating, using 1 as Poor/Unsatisfactory, 3 as Neutral, and 5 as Excellent

**INSTRUCTOR EVALUATION**

<b>The instructor for my course....</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
Was prepared for each meeting that we had about the internship.					
Provided adequate time for meetings with me about the internship.					
Started and stopped meetings that we had about my internship on time.					
Gave clear directions on assignments that were required for the course.					
Was respectful to me in the course.					
Was familiar with the internship requirements for the course.					
Was familiar with and able to answer any questions that I had about the work that I was doing on site.					
Made sure that I understood the requirements for the course before I started the internship.					
Was available for follow up questions or meetings as needed.					
Provided me with additional resources as needed.					
Met my expectations for the course.					

**COURSEWORK EVALUATION**

<b>The coursework....</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
Was adequate for the requirements of my internship course.					
Directly related to furthering my experience on site.					
Furthered my internship experience.					

<b>The coursework....</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
Furthered my content knowledge of the field.					
Furthered my practical knowledge of the field.					
Furthered my knowledge about work requirements in the field.					
Met my expectations for the course.					

**If you have any other comments, please share them here.**



**STUDENT-INTERN EVALUATION FORM**  
***TO BE COMPLETED BY THE SITE SUPERVISOR***

To receive credit for their internship, the site supervisor must submit an evaluation form related to their intern. We request that you review your responses with the student prior to submitting for their own professional development. At the end of the semester, submit this form to the Career Center ([career@fxua.edu](mailto:career@fxua.edu)) or directly to the student-intern.

Intern's Name: \_\_\_\_\_ Student ID: \_\_\_\_\_

Company/Organization: \_\_\_\_\_

Site Supervisor (your name): \_\_\_\_\_

Date of Evaluation: \_\_\_\_\_

Please evaluate your overall experience with this intern in terms of the following by circling the appropriate rating, using 1 as Poor/Unsatisfactory, 3 as Neutral, and 5 as Excellent

**OVERALL PERFORMANCE**

The intern's....	1	2	3	4	5
Professionalism					
Work ethic					
Initiative					
Adaptability					
Adherence to requirements or organizational rules					
Willingness to accept feedback from the supervisor					
Willingness to accept feedback from peers					
Quality of work (accurate and complete)					
Problem-solving ability and decision making skills					
Interpersonal Skills					
Communication skills (verbal)					
Communication skills (written)					
Work attire					
Punctuality					

The intern's....	1	2	3	4	5
Computer Skills					
Technical Skills (example, software, applications, etc., used for their position)					
Practical knowledge (knowledge of the field)					

**If you have any other comments, please share them here.**

**This feedback was reviewed by the following:**

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Instructor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Career Center Manager Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_