

EVALUATION OF THE INTERN BY SITE SUPERVISOR

Student Intern Name: _____

Internship Site: _____

Site Supervisor's Name: _____

1. In your opinion, how well were the learning objectives achieved or not achieved by the intern?

2. In what ways did the student intern contribute to your organization?

3. What particular strengths did the student intern demonstrate that might prove valuable in a future career?

4. Are there any areas in which the student intern might need strengthening?

5. Overall assessment of the intern's performance (circle one)

Excellent Above Average Average Below Average Unacceptable

6. Overall assessment of the intern's contribution to your organization (circle one)

Excellent Above Average Average Below Average Unacceptable

Please sign and return this form to the faculty advisor: The University of Georgia, Adult Education Program, River's Crossing, 850 College Station Rd. Athens, GA. 30602.

Site Supervisor

Date