

## Internship Evaluation by Supervisor

**General Information:**

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

Supervisor's Name/Title: \_\_\_\_\_

Agency/Organization Name: \_\_\_\_\_

**Internship Information:**

Start date:                      End date:                      Hours per Week:

**Please select the column that best describes the intern's performance during his/her internship:**

	Excellent	Very Good	Average	Below Average	Comments
<b>Attendance</b> - Attends work regularly and on time					
<b>Production</b> -Produces the expected volume of work					
<b>Thoroughness and Accuracy</b> - Attentive to detail and gets the job done right					
<b>Initiative</b> -Takes initiative on project assignments and offers effective solutions for improving operations					
<b>Written Communication</b> -Writes with clarity and uses critical thinking skills					
<b>Interpersonal Communication</b> - Articulates ideas and concerns clearly; maintains effective two-way communication with staff, peers, and supervisor					

**Modesto A. Maidique Campus**  
11200 S.W. 8th Street, GC 230  
Miami, FL 33199  
(305) 348-2423

**Engineering Center**  
10555 W. Flagler Street, EC 2852  
Miami, FL 33174  
(305) 348-1281

**Biscayne Bay Campus**  
3000 N.E. 151st Street, WUC 255  
North Miami, FL 33181  
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In reviewing the intern's Learning Goals proposal, do you believe that the intern has successfully achieved those goals? Please explain.

What suggestions would you offer the intern to enhance his/her career development and future job success?

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