

**EVALUATION OF INTERN BY SITE SUPERVISOR**

Intern name _____	
Site organization _____	
Site supervisor _____	Title _____
Email _____	Phone # _____

Thank you very much for taking the time and energy to serve as an internship supervisor. We truly value your participation. Please evaluate the performance of the student intern. After sharing the completed form with the intern, please fax a copy to the internship coordinator, at 901-678-4287.

**PART I**

Using the scale provided, please evaluate the intern's performance in the following areas:  
**5=Outstanding 4=Above average 3=Average 2=Below average 1=Poor**

PERFORMANCE AREA	RATING
• Interpersonal and teamwork skills	_____
• Verbal communication skills	_____
• Written communication skills	_____
• Problem solving skills	_____
• Judgment	_____
• Demonstration of initiative	_____
• Dependability	_____
• Ability to learn	_____
• Ability to accept/use criticism	_____
• Personal computer skills	_____

1. In reviewing the objectives and activities stated in the Student/Employer Internship Agreement, has the intern successfully achieved these objectives? Please elaborate.
2. What are the intern's most significant strengths?
3. In what area(s) can the intern improve?
4. If asked, would you feel comfortable writing a reference for this student?

5. If there were an appropriate job opening, would your organization consider the student as a potential candidate? Why or why not?

6. How could the Department of Journalism improve its #GoProOrGoHome internship program?

\_\_\_\_\_  
Signature of internship supervisor

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of intern

\_\_\_\_\_  
Date

**Please return to the internship coordinator, at fax number: (901)-678-4287.**