

DEPARTMENT OF MANAGEMENT/MIS
College of Business
University of West Florida
Internship Supervisor's Evaluation (please print)

Student Name: _____ Major: _____

Company Name: _____

Phone: _____

This Internship was _____ paid _____ unpaid.

Please check: Fall ___ Spring ___ Summer ___ Year _____ Total Number of Hours Worked: _____

Directions: Please evaluate the student with the following scale

E=Excellent A=Above Average S=Satisfactory N=Needs Improvement U=Unsatisfactory N/A=Not Applicable

PERFORMANCE ITEM	RATING	COMMENTS OR EXAMPLES
Quality of work (accuracy, thoroughness)		
Quality of work (speed, deadlines)		
Oral communication, expression of ideas		
Written communication skills		
Completion of assignments		
Acceptance of responsibility		
Response to constructive criticism		
Working relationship with others		
Takes initiative, seeks assignments		
Shows enthusiasm, interest in job		
Appropriate appearance, dress		
Resourcefulness, creativity		
Attendance, punctuality		
Understanding/adhering to the rules, procedures		
OVERALL PERFORMANCE RATING		

Any additional comments:

Supervisor's Signature: _____ Date: _____

Print name: _____