The Department of Human Resource Development and Technology
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STUDENT INTERNSHIP EVALUATION FORM

Intern: _____ Sponsoring Organization: _____

1. Do you want your replies to be made available to the organization at which you interned?
   Yes No
2. Would you seriously entertain an offer for permanent employment with this organization?
   Yes No
3. The level of responsibility given to you:

Low				High
1	2	3	4	5

4. Nature of work assigned to you:

Dull				Interesting
1	2	3	4	5

5. Supervision and guidance given to you:

Inadequate				Adequate
1	2	3	4	5

6. Work Environment:

Unpleasant				Pleasant
1	2	3	4	5

7. Degree of client or customer contact:

Small				Great
1	2	3	4	5

8. Time demands of your job:

Light				Heavy
1	2	3	4	5

9. Extent to which you applied the knowledge of your degree:

Small				Great
1	2	3	4	5

10. Practical skills and knowledge acquired:

Little				Considerable
1	2	3	4	5

11. Degree to which your internship met your expectations:

Small				Great
1	2	3	4	5

12. Overall internship experience:

Negative				Positive
1	2	3	4	5

13. Impression of organization for which you interned:

Negative				Positive
1	2	3	4	5

Comments may be included on reverse.