



Internship Final Evaluation

To the Professional Supervisor: As our intern reaches the end of this semester or term, it is time for you to complete the following evaluation. This is the same form you will use at the mid point of the semester. It is our expectation that you will discuss this evaluation with our intern. Please complete this form and submit it online to the Internship Academic Supervisor, with an e-mail copy noted to the intern.

Please evaluate the intern's performance and abilities:

Professional Supervisor _____

Student Intern _____

PERSONAL QUALITIES

	Unsuitable				Neat
Appearance	1	2	3	4	5
	Awkward/Timid				Poised/Confident
Maturity	1	2	3	4	5
	Uninterested				Enthusiastic
Attitude	1	2	3	4	5
	Uncooperative				Cooperative
Cooperation	1	2	3	4	5
	Difficulty working w/others				Works well w/others
Interpersonal Relations	1	2	3	4	5

WORK HABITS

	Disorganized				Organized
Organization	1	2	3	4	5

	Slow to learn				Learns quickly
Ability to Learn	1	2	3	4	5

	Needs monitoring				Able to work alone
Initiative	1	2	3	4	5

	Poor				Excellent
Judgment	1	2	3	4	5

	Neglectful				Dependable
Responsibility	1	2	3	4	5

	Irregular				Regular
Attendance	1	2	3	4	5

	Tardy				On time
Punctuality	1	2	3	4	5

WORK PERFORMANCE

	Low output				High output
Quantity of Work	1	2	3	4	5

	Poor				Excellent
Quality of Work	1	2	3	4	5

What do you consider to be the outstanding personal qualities/strengths of the intern?

What do you consider to be the weaknesses of the intern, and how can the student work to improve these areas?

Have there been any problems? Please explain the problems and if/how they have been resolved.

Do you have any recommendations regarding the Hilbert College DMAC Internship Program?

Digital Media and Communication Department

Internship Time Verification Document

This document serves as the official internship time verification for proof of hours completed at my internship. As an intern with _____
[name of company] in _____ [city, state/country],
I have completed _____ [number of internship hours] for _____
[# of registered credit hours].

Print Name [intern] _____

Signature [intern] _____ Date _____

*Print Name [supervisor] _____

Signature [supervisor] _____ Date _____

*Number at which Supervisor can be reached for confirmation: (____) _____ - _____

**Please return these 2 forms (Internship Evaluation and Internship Time Verification)
using one of the two methods:**

Christopher Gallant

-OR-

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Internship Coordinator

Digital Media and Communication

Hilbert College

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Thank you for participating in the evaluation of this Hilbert College student intern. You may share your feedback with the student.