**Intern Performance Evaluation**

Use this form to evaluate your UMSL internship student according to these guidelines:

1). Please ask a supervisor who has had considerable (preferably day-to-day) contact with the student to complete this evaluation. The more direct the contact, the more valuable the performance evaluation.

2). Please insure that the supervisor completing the form discusses the evaluation with the student. The internship is a learning experience, and the student needs to know his or her strengths and weaknesses as an intern. An accurate evaluation helps the student to grow personally and professionally.

**Student-intern’s name:** ______________________________________________________

**Company/Organization:** __________________________________________________

**Supervisor:** ______________________________________________________________

<table>
<thead>
<tr>
<th>Performance/Evaluation</th>
<th>Poor</th>
<th>Fair</th>
<th>Good</th>
<th>Excellent</th>
<th>Outstanding</th>
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<tbody>
<tr>
<td>Attendance (punctuality)</td>
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<td>Productivity (volume of work; promptness)</td>
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<td>Quality of work (accuracy, intelligence, neatness)</td>
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<td>Initiative (self-starter, resourceful)</td>
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<td>Dependability (thorough, organized)</td>
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<td>Attitude (enthusiasm, curiosity, ambition)</td>
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<td>Interpersonal relations (cooperative, courteous, friendly)</td>
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<td>Ability to learn (comprehension, on-task adjustments)</td>
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<td>Use of academic background (applied education to internship project)</td>
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<td>Communication skills (oral and written)</td>
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<td>Judgment (maturity, decision-making)</td>
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<td>Overall performance</td>
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Please use the spaces overleaf to make comments, if any.
Please summarize. Your comments will be particularly helpful to the student intern.

Areas where student excels:

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Areas where student made most progress ‘on the job’:

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Aspects of student’s work most needing improvement or attention (before undertaking similar work or projects in the future):

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Was student’s academic background sufficient or appropriate for this internship/project?

________________________________________________________________________
________________________________________________________________________

Has this report been discussed with the student?  ☐ Yes ☐ No

Student comments:

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Signatures:  _____________________________________________________________
            (supervisor)

            _____________________________________________________________
            (student)

Please send or FAX this evaluation form to:

Geri Friedline  (314) 516-7874 (direct line)
Associate Teaching Professor  (314) 516-5243 (College Office)
Pierre Laclede Honors College  (314) 516-6873 (FAX)
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