

Final Field Placement Evaluation Report

Intern's Name: _____

Site: _____

Site Supervisor's Name, Title, and Phone Number:

Semester/Year: _____ Date: _____

To Agency Supervisor:

We hope that this Intern has been of help to you and your organization. As an observer of the Intern's field performance, you can provide information that is vital to a complete evaluation of his/her experience. Please take a few minutes to answer the following questions, disregarding any that are not applicable. Please discuss the assessment with the Intern.

1. Describe the Intern's most significant accomplishment or activity.

2. How would you rate the Intern's ability to perform major duties? Indicate academic preparedness and skill level prior to the internship. Did the Intern make progress? To what extent?

3. How would you rate the Intern's ability to take initiative and make decisions?

4. How would you rate the Intern's ability to comprehend the overall mission of the organization and the organization's relationship to the larger environment? If possible, cite examples.

5. How would you rate the Intern's ability to relate with supervisors and co-workers? _____

6. How would you rate the Intern's ability to work with the organization's clientele? Provide examples.

7. How would you rate the Intern's ability to comply with the basic regulations required of the organization's employees? Give examples. Was the Intern reliable? Was he/she punctual in meeting work deadlines?

8. Were there any factors beyond the Intern's control that may have adversely affected his/her performance (such as change in supervisor, loss of funding, low workload, etc.)? If so, please explain.

9. If you were in a position to fill a vacancy in your organization, would you hire the Intern based on performance during the internship? _____

10. The KSU Internship program meets the needs of my organization and I would like to consider Internship Interns in the future. Yes _____ No _____

11. Using a scale of 1 to 5 (5=highest level of proficiency), please rate your Intern based on the skill categories listed below. Please make comments in the space provided.

Leadership _____ Communication _____ Organization _____

Creativity _____ Problem Solving _____ Teamwork _____

Technical _____ Attendance _____ Punctuality _____

Overall Performance _____

Comments:

THIS FORM MUST BE submitted to the Internship Coordinator in a sealed envelope, taped, and requires the signature of the supervisor across the tape to ensure no tampering. In the alternative, the form may be emailed directly to the internship coordinator.

Signature of Intern: _____ Date: _____

Signature of Supervisor: _____ Date: _____