

INTERNSHIP EMPLOYER EVALUATION FORM

SCHOOL OF GLOBAL & INTERNATIONAL STUDIES

Supervisors of School of Global and International Studies (SGIS) students who participated in an internship at their organization should **submit this form electronically as an e-mail attachment to sgisgrnt@indiana.edu** upon completion of the student's work. This form will be consulted by the SGIS Director of Academic Initiatives and Experiential Learning to assess student progress in the internship and suitability of the organization at large.

| STUDENT INFORMATION | |
|---|---|
| Student Name: | Term: <input type="checkbox"/> Fall <input type="checkbox"/> Spring <input type="checkbox"/> Summer Year: 20 |
| Supervisor's Name: | Supervisor's Email: |
| Supervisor's Phone Number: | |
| THE INTERNSHIP/VOLUNTEER EXPERIENCE | |
| Organization Name: Web Address (URL): Experience Location (City/State/Country) : Dates of Internship: Hours per Week: | |
| Please provide an overview of the tasks that the student performed as part of his/her internship. Indicate areas where the student intern performed particularly well or needed significant improvement. | |
| Compared to other current and former interns, how would you rate this student's overall performance? Please feel free to comment. <div style="margin-left: 40px;"> <input type="checkbox"/> Outstanding (top 10%) <input type="checkbox"/> Good (top 25%) <input type="checkbox"/> Fair (top 50%) <input type="checkbox"/> Poor (bottom 50%) <input type="checkbox"/> Unable to compare </div> Comments: | |
| An important aspect of an internship is the application of academic knowledge to the development of job-related skills. How would you rate the student's development during the internship? <div style="margin-left: 40px;"> <input type="checkbox"/> Outstanding (top 10%): The intern learned and applied new skills very rapidly. <input type="checkbox"/> Good (top 25%): The intern learned and applied new skills relatively fast. <input type="checkbox"/> Fair (top 50%): The intern learned and applied new skills. <input type="checkbox"/> Poor (bottom 50%): The intern did not learn or apply new skills well. </div> | |
| Are there any aspects of the student's performance during the internship that you consider to be particularly noteworthy? Did the intern do anything unusually well or put in extra effort in any area? | |
| Are there any aspects of the student's performance during the internship in which you think the student needs improvement? Did the intern do anything poorly? How might this be remedied? | |

How would you rate this student's suitability to a career in your field? Please provide any advice that will assist the student in improving his/her preparedness for a permanent, full-time position.

SUPERVISOR ACKNOWLEDGEMENT

Supervisor Name:

Date: