Office of Diversity and Inclusion
UNIVERSITY OF COLORADO ANSCHUTZ MEDICAL CAMPUS

KAISER PERMANENTE®

Internship Proficiency Evaluation Form

Preceptor

First Name _____ Last Name _____ Date _____
MM/DD/YYYY

Intern

First Name _____ Last Name _____ Date _____
MM/DD/YYYY

Short description of work performed by intern:

Please return to:
Anschutz Medical Campus office of Diversity and Inclusion
Medhat Ahmed Medhat.Ahmed@ucdenver.edu, and/or to the
Kaiser Permanente office of Diversity Development -
Andrea Law Andrea.N.Law@kp.org

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UNIVERSITY OF COLORADO ANSCHUTZ MEDICAL CAMPUS

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Internship Proficiency Evaluation Form

Rating Scale

5 - Skills demonstrated consistently at an excellent level (exceeded goals and expectations)
4 - Skills demonstrated at a good level (results were met and skills were demonstrated at acceptable level)
3 - Skills demonstrated at an average level (some results and skills were met)
2 - Skills demonstrated at a below average level (little to no results and skills were demonstrated)
1 - Results were not achieved, further skill development is necessary

Proficiency	Learning Objective
1.	
	Circle One: **5 = Excellent ➢ 1 = Development is necessary**

Mid-Summer Rating	0	
Knowledge Application		
▪ Intern ability to apply knowledge to problem solve	0	n/a
▪ Intern ability to give and receive constructive criticism	0	n/a
▪ Intern follows procedures and instructions	0	n/a
▪ Intern is able to take leadership of, and complete, assigned tasks	0	n/a
▪ Intern can identify and see underlying connections between concepts in the work-place	0	n/a
▪ Possesses an understanding of professional and ethical responsibilities	0	n/a

Final-Summer Rating	0	
Knowledge Application		
▪ Intern ability to apply knowledge to problem solve	0	n/a
▪ Intern ability to give and receive constructive criticism	0	n/a
▪ Intern follows procedures and instructions	0	n/a
▪ Intern is able to take leadership of, and complete, assigned tasks	0	n/a
▪ Intern can identify and see underlying connections between concepts in the work-place	0	n/a
▪ Possesses an understanding of professional and ethical responsibilities	0	n/a

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Proficiency	Learning Objective
2.	

Circle One: **5 = Excellent ➢ 1 = Development is necessary**

Mid-Summer Rating	0	
Knowledge Application		
▪ Intern ability to apply knowledge to problem solve	0	n/a
▪ Intern ability to give and receive constructive criticism	0	n/a
▪ Intern follows procedures and instructions	0	n/a
▪ Intern is able to take leadership of, and complete, assigned tasks	0	n/a
▪ Intern can identify and see underlying connections between concepts in the work-place	0	n/a
▪ Possesses an understanding of professional and ethical responsibilities	0	n/a

Final-Summer Rating	0	
Knowledge Application		
▪ Intern ability to apply knowledge to problem solve	0	n/a
▪ Intern ability to give and receive constructive criticism	0	n/a
▪ Intern follows procedures and instructions	0	n/a
▪ Intern is able to take leadership of, and complete, assigned tasks	0	n/a
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Proficiency	Learning Objective
3.	

Circle One: **5 = Excellent ➢ 1 = Development is necessary**

Mid-Summer Rating	0	
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▪ Intern ability to apply knowledge to problem solve	0	n/a
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▪ Intern follows procedures and instructions	0	n/a
▪ Intern is able to take leadership of, and complete, assigned tasks	0	n/a
▪ Intern can identify and see underlying connections between concepts in the work-place	0	n/a
▪ Possesses an understanding of professional and ethical responsibilities	0	n/a

Final-Summer Rating	0	
Knowledge Application		
▪ Intern ability to apply knowledge to problem solve	0	n/a
▪ Intern ability to give and receive constructive criticism	0	n/a
▪ Intern follows procedures and instructions	0	n/a
▪ Intern is able to take leadership of, and complete, assigned tasks	0	n/a
▪ Intern can identify and see underlying connections between concepts in the work-place	0	n/a
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Overall Summer Evaluation

The intern was cooperative and enthusiastic in developing summer internship projects.	☐ **Yes**	☐ **No**
The intern complied with agreed upon work schedule.	☐ **Yes**	☐ **No**
The intern communicated with patients in an appropriate manner, i.e. was respectful, used correct titles, etc.	☐ **Yes**	☐ **No**
The intern appeared to interact well with departmental staff.	☐ **Yes**	☐ **No**
The intern came to me with any problems related to the assigned projects or the department.	☐ **Yes**	☐ **No**
There were no major complaints from departmental staff about the intern.	☐ **Yes**	☐ **No**
I would recommend this intern for a second next year opportunity.	☐ **Yes**	☐ **No**

Supervisor Comments

1. Identify strengths/qualities that contributed to the intern's performance?

Comments:

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2. Identify development areas that need improvement.

Comments:

Recommendation for Next Summer:
Would you recommend the Intern for re-employment next summer? ☐ Yes ☐ No

Comments: