

# Internship Review Form PDF

Intern Name: \_\_\_\_\_

Internship Start Date: \_\_\_\_\_

Internship End Date: \_\_\_\_\_

Department: \_\_\_\_\_

Supervisor Name: \_\_\_\_\_

**Intern's Performance Summary:**

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**Strengths Identified During Internship:**

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**Challenges Faced by the Intern:**

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**Overall Rating of Intern:**

- Excellent
- Good
- Satisfactory
- Needs Improvement

**Future Recommendations for the Intern:**

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**Supervisor's Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_