**Project Internship Review Form**

**Intern Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
Project Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
Internship Duration: From \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ To \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
Department: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
Project Supervisor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Evaluation Table:**

| **Project Aspects** | **Excellent** | **Good** | **Needs Improvement** | **Not Applicable** |
| --- | --- | --- | --- | --- |
| **Understanding of Project** | **☐** | **☐** | **☐** | **☐** |
| **Research Skills** | **☐** | **☐** | **☐** | **☐** |
| **Contribution to Outcomes** | **☐** | **☐** | **☐** | **☐** |
| **Technical Skills** | **☐** | **☐** | **☐** | **☐** |
| **Meeting Deadlines** | **☐** | **☐** | **☐** | **☐** |
| **Creativity and Innovation** | **☐** | **☐** | **☐** | **☐** |
| **Overall Engagement** | **☐** | **☐** | **☐** | **☐** |

**Key Achievements of the Intern:**

**Supervisor Comments on the Project Work:**

**Final Recommendation:
☐ Highly Recommend
☐ Recommend
☐ Do Not Recommend**

**Supervisor’s Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**