

Intern Evaluation Form

EVALUATION OF EMPLOYER: to be filled out by student Intern

Student's Name: _____

Place of Employment: _____ **Supervisor's Name:** _____

Type of Work: _____

Please complete this form and return it as soon as possible. We welcome all your comments and suggestions about the internship and the program of placing students in on-the-job training.

	POOR	AVERAGE	GOOD	EXCELLENT
Diversity of art or design-related projects provided				
Clear directions and expectations communicated				
Environment conducive to professional work				
Flexible and/or reasonable work hours provided				
Mentorship provided for various work related issues				
Team work opportunity encouraged				
Career building and/or opportunity provided				
Learned new skills relating to my field				
Possibility for future employment				

Please provide general comments including a brief description of your projects and your accomplishments.

Would you recommend this employer?	Excellent	Good	Average	Below Average (Not Recommend)
Internship work contributions to my portfolio	Excellent	Good	Average	Below Average (Not Recommend)

Sign

Date