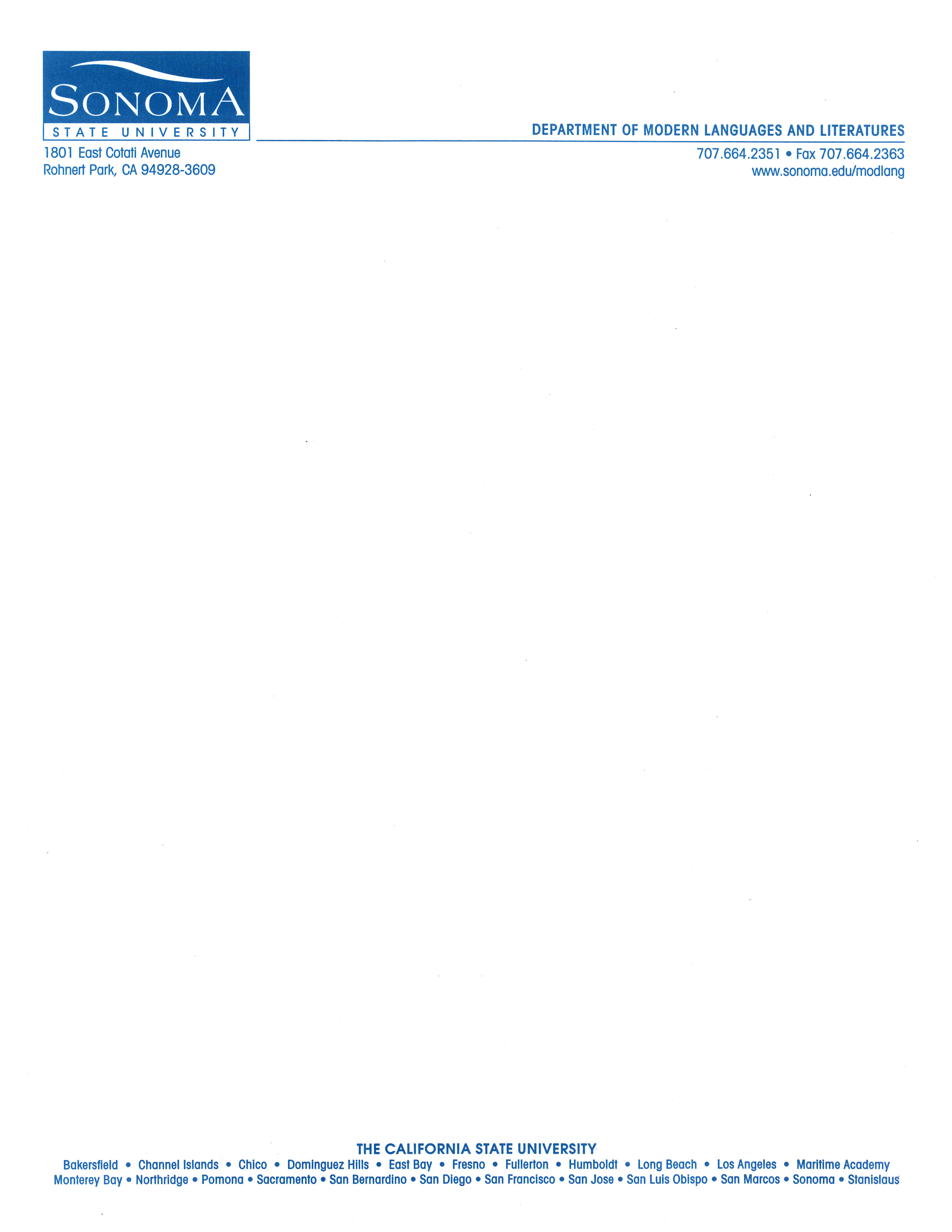
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**INTERN PERFORMANCE EVALUATION**

**(MUST BE FILLED OUT BY ON-SITE SUPERVISOR)**

NAME OF INTERN

ORGANIZATION

ADDRESS

ON-SITE SUPERVISOR

TITLE

PHONE NUMBER EMAIL

INTERN’S PRIMARY RESPONSIBILITY

SONOMA STATE PROFESSOR\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

DATES OF INTERNSHIP: FALL

SPRING

SUMMER

FROM TO

TOTAL HOURS WORKED: 45 Hours/1 Unit

135 Hours/3 Units

90 Hours/2 Units

180 Hours/4 Units

Please note your satisfaction with the intern in each category by circling the appropriate number representing the following categories: 1--UNSATISFACTORY; 2--IMPROVEMENT NEEDED;

3--AVERAGE; 4--ABOVE AVERAGE; 5--OUTSTANDING. N/A- NOT APPLICABLE

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Reports to work as scheduled | 1 | 2 | 3 | 4 | 5 N/A |
| Understands assignments quickly | 1 | 2 | 3 | 4 | 5 N/A |
| Performs assignments effectively | 1 | 2 | 3 | 4 | 5 N/A |
| Applies knowledge and skills learned | 1 | 2 | 3 | 4 | 5 N/A |
| Does work accurately and efficiently | 1 | 2 | 3 | 4 | 5 N/A |
| Anticipates and addresses problems | 1 | 2 | 3 | 4 | 5 N/A |
| Asks questions/makes suggestions | 1 | 2 | 3 | 4 | 5 N/A |
| Takes intern assignments seriously | 1 | 2 | 3 | 4 | 5 N/A |
| Works well with staff | 1 | 2 | 3 | 4 | 5 N/A |
| Learns from experiences | 1 | 2 | 3 | 4 | 5 N/A |
| Expresses opinions and problems maturely | 1 | 2 | 3 | 4 | 5 N/A |

GENERAL COMMENTS: Please describe the intern’s major strength(s) and areas that need work and add any comments you wish to make:

MAJOR STRENGTH(S):

AREAS TO WORK ON:

OTHER COMMENTS:

I verify that this information is my evaluation of this student:

Signature of On-Site Supervisor Date

**\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*TO BE FILLED OUT BY STUDENT\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\***

I verify that I have received a copy of this evaluation:

Signature of Student Intern Date

Course No.

***Intern Performance Evaluation form must be submitted to your professor by the last day of Finals Week. For dates check*** [***http://www.sonoma.edu/about/calendars.html***](http://www.sonoma.edu/about/calendars.html)

Rev: 3/16 ks