

Student Evaluation of Internship

Name: _____ Class Year: _____

Semester of Internship: Fall Winter Spring Summer Year: _____

Organization where you interned: _____

On-Site Supervisor's name: _____

Faculty Sponsor's name: _____

Indicate the most appropriate response to the statement.

5 = Strongly Agree 4 = Agree 3 = Neutral 2 = Disagree 1 = Strongly Disagree NA = Not Applicable

- | | | | | | | |
|---|---|---|---|---|---|----|
| ▪ This experience gave me a realistic preview of my field of interest | 5 | 4 | 3 | 2 | 1 | NA |
| ▪ As a result of my internship, I have a better understanding of concepts, theories, and skills in my course of study | 5 | 4 | 3 | 2 | 1 | NA |
| ▪ I was given an adequate orientation at the beginning of my internship | 5 | 4 | 3 | 2 | 1 | NA |
| ▪ I was given adequate training throughout my internship | 5 | 4 | 3 | 2 | 1 | NA |
| ▪ I had regular meetings with my on-site supervisor and received constructive, on-going feedback | 5 | 4 | 3 | 2 | 1 | NA |
| ▪ I was provided levels of responsibility consistent with my ability and was given additional responsibility as my experience increased | 5 | 4 | 3 | 2 | 1 | NA |
| ▪ I felt that I was productive for the organization | 5 | 4 | 3 | 2 | 1 | NA |
| ▪ I had a good working relationship with my co-workers | 5 | 4 | 3 | 2 | 1 | NA |
| ▪ I now feel better prepared to enter the world of work after this experience | 5 | 4 | 3 | 2 | 1 | NA |
| ▪ My internship experience confirmed my interest in a career in this line of work | 5 | 4 | 3 | 2 | 1 | NA |
| ▪ I have decided to pursue a different career path due to my internship | 5 | 4 | 3 | 2 | 1 | NA |
| ▪ My faculty sponsor had regular contact with me throughout my experience | 5 | 4 | 3 | 2 | 1 | NA |
| ▪ I felt the academic work I was assigned was appropriate for the credit I received | 5 | 4 | 3 | 2 | 1 | NA |
| ▪ I recommend this employer for prospective internship students | 5 | 4 | 3 | 2 | 1 | NA |

Over
→

Through this internship I had the opportunity to use and develop my

▪ Interpersonal/human relations skills	5	4	3	2	1	NA
▪ Oral communication/presentation skills	5	4	3	2	1	NA
▪ Creativity	5	4	3	2	1	NA
▪ Problem solving abilities	5	4	3	2	1	NA
▪ Critical thinking skills	5	4	3	2	1	NA
▪ Writing skills	5	4	3	2	1	NA
▪ Major specific academic/technical skills	5	4	3	2	1	NA

1.) Overall how would you rate this internship?

- Excellent Learning Experience
- Good Learning Experience
- Average Learning Experience
- Below Average Learning Experience
- Poor Learning Experience

Please

Explain _____

2.) Were you offered a full-time, part-time, or permanent position with the organization after completing the internship?

- Yes (Please Explain: _____)
- No

3.) Was the internship paid? Yes No

4.) If Yes, what was your compensation range (optional)?

Hourly Wage:

- \$5.00 -7.00/hour \$7.01 - \$9.00/hour \$9.01 - \$11.00/hour \$11.01 - \$13.00/hour
- \$13.01 - \$16.00/hour \$>16.01/hour Other (including stipend, housing, parking, etc.)

Please return this evaluation to:

Barbara Watts, Director of Career Services

PO Box 1096, Sweet Briar, VA 24595

bwatts@sbcb.edu ▪ 434-381-6465 ▪ Fax 434-381-6396