

Goshen College Student Evaluation of Internship

Please respond to the following questions regarding your internship experience and site. The purpose of this form is to provide opportunity for honest appraisal of your current internship experience.

Your Name: _____ Date: _____

Organization: _____ Semester/Year: _____

Location: _____ Supervisor: _____

Please rate the following aspects of your internship experience on the basis of this scale:

1 Poor 2 Fair 3 Good 4 Excellent

Site 1 2 3 4

Physical environment is safe

An orientation was provided to the organization

Adequate resources were available to accomplish projects

Co-workers were accepting and helpful

Supervisor 1 2 3 4

Supervisor provided a clear job description

Regular feedback was provided on my progress and abilities

An effort was made to make it a learning experience for me

Supervisor provided levels of responsibility consistent with my abilities

Supervisor was supportive of the agreed-upon work days and hours

Learning Experience 1 2 3 4

Work experience related to my academic discipline and/or career goal

Opportunities were provided to develop my communication skills

Opportunities were provided to develop my interpersonal skills

Opportunities were provided to develop my creativity

Opportunities were provided to develop my problem-solving abilities

This experience has helped prepare me for the workplace

Overall Value Rating for this Internship 1 2 3 4

Feel free to explain any of your responses to the above criteria here:

- | | | | |
|---|-----|----|-----------|
| 1. Would you work for this supervisor again? | Yes | No | Uncertain |
| 2. Would you work for this organization again? | Yes | No | Uncertain |
| 3. Would you recommend this organization to other students? | Yes | No | Uncertain |