

INTERN'S EVALUATION FORM

Intern's Name _____ USIU ID _____

Date _____

Number of hour's intern has completed to date _____

Kindly evaluate the intern on the listed qualities, and any other that you may deem appropriate.

Please input into the Assessment box a grade using the following key:

Very Good (V.G), Good (G), Average (A), Poor (P), Not Applicable (NA)

QUALITIES	ASSESSMENT	COMMENTS (IF ANY)
Intern's attendance record		
Professionalism/Intern's conduct		
Willingness to perform assigned work		
Willingness to follow instructions		
Ability to meet set deadlines		
Quality of intern's work		
Ability to work in a team environment		
Ability to work independently		
Ability to offer new and innovative ideas		
Analytical thinking capabilities		
Overall performance of the intern		

Please give any comments here _____

NAME OF ORGANISATION _____

NAME OF SUPERVISOR _____ TITLE _____

DATE _____

SIGNATURE OF SUPERVISOR _____

(PLACE COMPANY STAMP OR SEAL HERE)

THANK YOU FOR THE EVALUATION OF THE INTERN AND THE OPPORTUNITY ACCORDED THEM.