

**Oberlin College
The Office of Career Services
Winter Term Internship Evaluation**

Student's Name: _____ Date: _____

Company/organization: _____

The purpose of this evaluation is to encourage communication between the worksite supervisor and the student intern. **Students must submit this completed evaluation to the Assistant Director of Career Services by Monday, January 30, 2012 in order to receive winter term credit.** When making your assessment, compare the student with other entry-level staff with similar levels of education and experience. Using the scale below, place the number that best reflects your evaluation in the space provided below each category. Please comment on each rating in order to encourage improvement or development.

1=Need Improvement 2=Satisfactory 3=Very Good 4=Outstanding

GOALS Were the goals set out at the beginning of the internship met?

INTERPERSONAL SKILLS How does the student relate to supervisors, co-workers and clients or customers?

COMMUNICATION SKILLS How do you rate the student's speaking, writing and listening skills?

LEARNING ORIENTATION How do you rate the student's outlook toward acquiring new knowledge?

ORGANIZATION ADJUSTMENT How well has the student adjusted to your organization's culture?

SKILLS How well does the student understand the skills and competencies needed for the job?

INITIATIVE How well does the student take on challenges, be resourceful, operate independently?

DEPENDABILITY How well does the student demonstrate follow through and timeliness?

Do you have any other comments or suggestions?

Supervisor's Name (please print): _____

Supervisor's Signature: _____

Student Signature: _____

Assistant Director of Career Services: _____

Please scan and email, or fax a copy of this evaluation to Career Services, Oberlin College.
email: internships@oberlin.edu Fax: 440.775.8089 Phone: 440.775.8140