

Evaluation form



Contact information

First name Last name

School Class

Full time student or Part time student

Company City

Mentor at internship Dates of internship

Teacher contact Date of contact

F = Failing | B = Barely passing | S = Satisfactory | E = Excellent

F B S E

Evaluation

Individual	Proactive in obtaining the internship & making arrangements					
	Paperwork was submitted in a timely fashion					
	Student kept to his/her appointments					
	Works at a decent pace					
	Works independently					
	Has knowledge on the subject/industry					
	Works in a safe manner					
	Can handle criticism, problems and conflicts					
	Social	Can adjust easily to company and culture				
		Is positive towards management and customers				
Is able and eager to ask questions						
Result	The student has shown growth					
	The student shows initiative in making his school assignments					
Perspective	I see this student fit for this industry					
Length of the internship	The student has fulfilled the days required by the school					
Total	What grade do you give the student overall?					

Strengths

Weaknesses

Advice

Further comments

Signature

student

internship

teacher

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