

**Internship Coordinator Evaluation**

If this is a multi-quarter internship, a separate copy of this form should be completed for each quarter.

**Student Information**

Name of Intern: \_\_\_\_\_

Student ID: \_\_\_\_\_

**Internship Site Information**

Name of Employer: \_\_\_\_\_

Employer Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_

Zip: \_\_\_\_\_

Supervisor's Name: \_\_\_\_\_

**Evaluation**

- |                       |                                       |   |
|-----------------------|---------------------------------------|---|
| Learning Log          | <input type="checkbox"/> Satisfactory | <input type="checkbox"/> Not Satisfactory |
| Formal Paper          | <input type="checkbox"/> Satisfactory | <input type="checkbox"/> Not Satisfactory |
| Resume                | <input type="checkbox"/> Complete     | <input type="checkbox"/> Not Complete     |
| Intern Evaluation     | <input type="checkbox"/> Complete     | <input type="checkbox"/> Not Complete     |
| Supervisor Evaluation | <input type="checkbox"/> Complete     | <input type="checkbox"/> Not Complete     |
| Final Grade           | <input type="checkbox"/> Credit       | <input type="checkbox"/> No Credit        |

Internship Year:

Quarter	Fall	Winter	Spring	Summer
Credits				

**Comments:**

\_\_\_\_\_  
 Internship Coordinator Name

\_\_\_\_\_  
 Internship Coordinator Signature

\_\_\_\_\_  
 Date