



Student Evaluation Form

Intern's Name _____ Date _____

Intern's Supervisor _____ Organization _____

Do you permit the student to receive a copy of the evaluation? Yes _____ No _____

| | Excellent | Above Average | Fair | Below Average | Poor | N/A |
|---|-----------|---------------|------|---------------|------|-----|
| Comprehension and Communication | | | | | | |
| Listens to and understands assignments | | | | | | |
| Asks appropriate questions/seeks clarification | | | | | | |
| Effective written and oral communication | | | | | | |
| Works well as a team player/with others | | | | | | |
| Attitude/Work Habits | | | | | | |
| Seeks out and uses constructive criticism | | | | | | |
| Adaptable and flexible | | | | | | |
| Punctual and reliable | | | | | | |
| Shows initiative | | | | | | |
| Proper appearance and etiquette | | | | | | |
| Enthusiastic/willing to learn | | | | | | |
| Performance | | | | | | |
| Manages time/meets deadlines | | | | | | |
| Demonstrates skills necessary for the work | | | | | | |
| Uses academic knowledge and skills | | | | | | |
| Shows responsibility for work | | | | | | |
| Describe the assignments, projects, and tasks of the intern. | | | | | | |
| | | | | | | |

What are the intern's strengths and suggested areas for improvement?

If necessary, please provide additional feedback about the intern's performance.

Overall performance:

Excellent_____ Above Average _____ Fair_____ Below Average_____ Poor_____

Please either sign this form and fax or mail it to the internship coordinator or email from your email address. The student intern is not allowed to email this form.

Signature of Intern Supervisor

Date

Thank you for allow University of New Orleans' students to intern with your organization.

Hamp Overton
Director of Internship Program
Film Program, School of the Arts
The University of New Orleans
2000 Lakeshore Dr., 331 PAC
New Orleans, LA 70148
Tel: 504-280-6381
Email: joverton@uno.edu