Albion College GERALD R. FORD INSTITUTE

FOR LEADERSHIP IN PUBLIC POLICY AND SERVICE Employer's Final Evaluation of Student

Name of student intern					Job title or work assignment				
Name of Organization, Company or Office					<u>Work</u>	per	iod (circle one)	September - Decembe January - April May - August	
E W G H W	-					Attitude - Application to work Outstanding in enthusiasm Very much interested and industrious Average in diligence and interest Somewhat indifferent Definitely not interested			
A U O	Exceptionally mature Above average in making decisions Usually makes right decision Often uses poor judgment Consistently uses bad judgment					 Dependability Completely dependable Above average in dependability Usually dependable Somewhat neglectful or careless Unreliable 			
L A R V Student's A	Learns very quickly Learns readily Average in learning Rather slow to learn Very slow to learn udent's response to suggestions & criticism Actively seeks suggestions for					Organization Uses time in the most efficient way Effectively follows established procedures within time limits Performs most tasks in an orderly manner Occasionally disorganized Consumes too much time completing assignments			
improvement Carries out suggestions and shows improvement Welcomes criticism but shows little or no improvement Has no visible reaction					Quality of work Excellent Below average Very good Very poor Average				
Resents being shown his/her mistake OVERALL PERFORMANCE					PunctualityAttendance Regular Regular Irregular Irregular				
Outstand	ding Very	Good	+	Average	-		Marginal	Unsatisfactory	
10	9	8	7	6	5		4 3	2-0	

If needed, supervisors may attach additional comments to this evaluation. In which areas of work performance and/or personality has the intern excelled and/or made the best contributions? What areas of the student's training and/or personality do you feel require improvement to help the intern as a professional in the workplace? If your organization had a vacancy, would you hire this intern? Why or why not? Please briefly discuss to what level this internship met your expectations. Immediate Supervisor: Signature Printed Name Supervisor E-Mail Address: Date: DID YOU DISCUSS THIS EVALUATION WITH THE INTERN? YES ____ NO ___ PLEASE RETURN THIS EVALUATION TO: Ford Institute, Albion College, 611 East Porter

St., Albion, MI 49224 or FAX to (517) 629-0920. May also be e-mailed to the Associate Director.