

## Student Evaluation of Internship Site

The purpose of this evaluation is to assist you in reflecting on your internship experiences and identifying areas of personal, professional, and academic growth. Your responses will be helpful not only to yourself but to students considering this internship site in the future and to you supervisor at the organization. Thank you for your assistance.

Semester/Year \_\_\_\_\_ Faculty Advisor: \_\_\_\_\_

Name: \_\_\_\_\_ Position Title: \_\_\_\_\_

Company: \_\_\_\_\_ Supervisor: \_\_\_\_\_

**I. List three most important tasks you were responsible for in your internship. Then rate your performance on each using the following scale.**

1 Poor	2	3 Fair	4	5 Excellent	
					<b>Tasks</b>
					<b>Rating</b>
					<b>Comments</b>
					1.
					2.
					3.

**II. Please rate the strengths and weaknesses of the site in terms of meeting your needs as an intern. Use the following scale.**

1= Below expectations 2= Somewhat met expectation 3 = Fair/Neutral  
4= Adequately met expectations 5 = Exceeded expectations

1. Willingness to integrate you into all appropriate levels of projects, activities, and programs.  
 1       2       3       4       5
2. Provision of assistance in helping you meet your personal and professional goals and objectives.  
 1       2       3       4       5
3. Cooperation of agency staff in providing professional growth experiences through training.  
 1       2       3       4       5
4. Interest in your internship and learning objectives.  
 1       2       3       4       5
5. Adequately describe tasks you were asked to perform.  
 1       2       3       4       5
6. Willingness to listen to suggestions or recommendations you might offer and willingness for discussion.  
 1       2       3       4       5
7. Adequate supervision provide throughout duration of internship.  
 1       2       3       4       5

**III. Assessment**

1. What was the most valuable aspect of the internship?

2. What was the least valuable aspect of the internship?
  
3. Were there any problems or concerns regarding your internship experience we should know about?
  
4. Would you recommend this internship to a friend or fellow student?      Yes      No  
If no, please explain.
  
5. Has this experience confirmed or changed your educational or career plans? Please explain.  
Confirmed:
  

Changed:

  
6. Describe any ways the internship experience could be improved.
  
7. Overall value of the internship (*circle one*)      Excellent      Good      Fair      Poor
 

a. Work environment	Excellent	Good	Fair	Poor
b. Supervision and feedback	Excellent	Good	Fair	Poor

**Please add any additional comments:**

Return this form to the  
 Director of the Career Development Center  
 Lenfest Commons  
 Room 103  
 FAX 717-264-1578

This form may be filled out online and/ or scanned then emailed to [career@wilson.edu](mailto:career@wilson.edu)  
No later than the first day of exam week for the semester.