

INTERNATIONAL AFFAIRS GRADUATE PROGRAM
California State University, Sacramento

INTERNSHIP COMPLETION AND PERFORMANCE EVALUATION

Please use this form or send a letter to indicate performance.

Intern's Name: _____ Date: _____

Supervisor's Name: _____

Agency: _____

Address: _____

Date intern began work: _____

Date intern commenced work: _____

How many hours per week on average did the intern work? _____

Total number of hours intern worked at your organization: _____

Please complete the following questions providing us with as much detail as necessary:

Public policy and issue areas on which intern worked at your organization: _____

Description of Assignments: _____

Please rate the intern's performance in the following areas using the five point scale: (5=Excellent; 4=Good; 3=Average; 2=Poor; 1=Unsatisfactory)

1. Quality of Work

_____ Competence and knowledge
_____ Resourcefulness
_____ Productivity
_____ Initiative and creativity

2. Work Habits

_____ Attendance
_____ Completion of Assignments
_____ Orderliness of Work

3. Personal Relations

_____ with Supervisor (s)
_____ with Fellow Employees
_____ with Public (if applicable)

4. Attitude Toward Work

_____ Acceptance of Assignments
_____ Willingness to Learn
_____ Interest Concerning Work

Comments on the Intern's Performance:

Additional Comments:

Please feel free to comment on the constructive aspects of this internship program. Do you have any suggestions for improvement of the project for the future?

Prepared by: _____

Title: _____

Signature: _____

Date: _____

Please return this form directly to :

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