

# Internship Evaluation

Mass Communications Department and Center for New Media

Please return to Samuel Ebersole, Department Chair

samuel.ebersole@colostate-pueblo.edu

549-2018

719-549-2120 Fax

Student Name \_\_\_\_\_

PID: \_\_\_\_\_

Supervisor Name & Title \_\_\_\_\_

Organization \_\_\_\_\_ Phone: \_\_\_\_\_

Please evaluate the student intern with 1 being your lowest rating, 2 being average, and 3 being above average, and 4 being your highest rating in the areas listed. Feel free to add additional comments, as well.

<b><i>Skill Evaluation</i></b>	<b><i>1 LOW</i></b>	<b><i>2 AVERAGE</i></b>	<b><i>3 ABOVE AVERAGE</i></b>	<b><i>4 HIGH</i></b>	
Writing	1	2	3	4	NA
Interpersonal communication	1	2	3	4	NA
Strategic thinking	1	2	3	4	NA
Technology	1	2	3	4	NA
Problem-Solving	1	2	3	4	NA

## ***Professionalism***

Responsibility	1	2	3	4
Punctuality/Deadlines	1	2	3	4
Dependability	1	2	3	4
Poise/Self-Control	1	2	3	4
Initiative	1	2	3	4
Ability to take criticism	1	2	3	4

Comments \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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\_\_\_\_\_

Student Signature \_\_\_\_\_ Date \_\_\_\_\_

Supervisor Signature \_\_\_\_\_ Date \_\_\_\_\_