



DA VINCI CHARTER ACADEMY
 A NEW TECHNOLOGY HIGH SCHOOL
Rody Boonchouy, Principal



Final EVALUATION Form

(This form must be completed by your supervisor at 40 hours of work and reviewed by the Internship Coordinator)

Thank you for your participation in Da Vinci Charter Academy's Internship Program! We trust that the experience was both educational and beneficial to your business and our student.

This is the final Evaluation Form that you fill out, sign, and send back to the school. It signifies the completion of the internship for this particular student. Your answers and comments will help us evaluate the program and the learning impact on the student interns.

Again, thank you for your participation. If you have any additional questions, comments, or concerns, please call the Internship Coordinator, Susan Kirby at 530.757.7154 or email: skirby@djUSD.net.

Please print your answers:

Name and Title: _____

Company Name: _____

DVCA Student Intern: _____

1. Would you recommend DVCA student interns to another business in the community? ____ yes ____ no
 (If no, please explain in comment section)

2. Would you like to have another DVCA student intern at your site? ____ yes ____ no

3. Did the DVCA student intern complete 40 internship hours with your business? ____ yes ____ no

4. What skills and knowledge of the DVCA student intern did you rely upon the most?

5. How successful was the DVCA student intern in reaching the four work objectives outlined in the Internship Contract? _____

Comments and Suggestions: _____

I grant Da Vinci Charter Academy permission to use my answers in marketing materials. Yes ____ No ____
 Anonymously, OK ____

Employer Signature _____ Date _____

This form can be returned to Susan Kirby via fax 530.759.2178. Thank You!

Internship Coordinator's Initials _____ Date _____

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 Website: DaVinciCharterAcademy.net