

**EMPLOYER'S EVALUATION OF STUDENT INTERN**

Semester/Year: \_\_\_\_\_ Due Date: \_\_\_\_\_

Student Name: \_\_\_\_\_ Position: \_\_\_\_\_

Worksite Supervisor: \_\_\_\_\_

Your evaluation of your student intern provides valuable feedback for the student and the University. Please rate your intern's performance, review the evaluation with him/her, and return to the UCA Film Department before the due date. Using the scale provided, please evaluate the intern in the following areas:

	<b>1 = Less than Satisfactory</b>	<b>5 = Excellent</b>
1. Quality of work	1	2 3 4 5
2. Quantity of work	1	2 3 4 5
3. Responsibility	1	2 3 4 5
4. Punctuality	1	2 3 4 5
5. Attitude toward work	1	2 3 4 5
6. Initiative	1	2 3 4 5
7. Flexibility	1	2 3 4 5
8. Appearance	1	2 3 4 5
9. Interpersonal skills	1	2 3 4 5
10. Oral communication	1	2 3 4 5
11. Written communication	1	2 3 4 5
12. <b>Overall Rating</b>	1	2 3 4 5

The student's particular strengths are:

The student could improve performance by:

Employer's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Student's signature: \_\_\_\_\_ Date: \_\_\_\_\_

# Film Internship

Department of Film, Theatre, and Creative Writing  
University of Central Arkansas  
Conway, Arkansas 72035 (501) 450-3344 FAX (501) 450-3343

## **STUDENT EVALUATION OF WORK EXPERIENCE**

Student Name: \_\_\_\_\_ Position: \_\_\_\_\_

Internship Worksite: \_\_\_\_\_ Worksite Supervisor: \_\_\_\_\_

Faculty Adviser: \_\_\_\_\_

Please evaluate your work experience by using the following rating scale. Return this form to your Faculty Internship Coordinator along with the other written requirements for the internship in your portfolio.

**1 = poor      2 = satisfactory      3 = good      4 = excellent**

1. What was the quality of your work supervision? 1 2 3 4
2. How helpful were fellow employees? 1 2 3 4
3. To what degree were your projects / duties explained? 1 2 3 4
4. To what extent did the content of this work experience meet your expectations? EXPLAIN: 1 2 3 4
5. How beneficial was this work experience? EXPLAIN: 1 2 3 4
6. How strongly would you recommend this work experience to others in your major / concentration? 1 2 3 4
7. What is your overall rating of this work experience? 1 2 3 4
8. Was information and service provided by the Department of Film, Theatre, and Creative Writing adequate? EXPLAIN: 1 2 3 4
9. Did your faculty coordinator clearly explain course requirements? Did you have problems meeting with your faculty coordinator? EXPLAIN: 1 2 3 4
10. Additional comments:

Student's signature \_\_\_\_\_ Date: \_\_\_\_\_