

COOPERATIVE EDUCATION /INTERNSHIP STUDENT EVALUATION

CO-OP /INTERN STUDENT AND EMPLOYER INFORMATION			
Name of Student:		Cell Phone:	Organization:
Co-op/Intern Position Title:		Address:	
Department or Area of Organization:		City:	State: Zip:
Dates Employed:	Hours worked per week:	Website:	
	Salary per hour (if applicable):		
EMPLOYER'S EVALUATION OF STUDENT PERFORMANCE			
Supervisor's Name:		Title:	
Office phone:		Email Address:	

Instructions: Please evaluate the student objectively, comparing him/her with other interns of similar educational or experience background. Please place an X on the line next to the words that best describe this student's performance.

Relationship with others:

- ☐ Exceptional team player
- ☐ Works well with others
- ☐ Gets along satisfactorily
- ☐ Has some difficulty working with others
- ☐ Unsatisfactory

Work Attitude:

- ☐ Outstanding diligence and interest
- ☐ Very interested and industrious
- ☐ Average in diligence and interest
- ☐ Somewhat indifferent
- ☐ Unsatisfactory

Judgment:

- ☐ Exceptionally mature judgment
- ☐ Above average in making decisions
- ☐ Usually makes the right decision
- ☐ Unsatisfactory

Dependability:

- ☐ Completely dependable
- ☐ Above average in dependability
- ☐ Usually dependable
- ☐ Unsatisfactory

Ability to Learn:

- ☐ Learns very quickly
- ☐ Learns readily
- ☐ Average in learning
- ☐ Rather slow to learn
- ☐ Unsatisfactory

Quality of Work:

- ☐ Excellent
- ☐ Very good
- ☐ Average
- ☐ Below average
- ☐ Unsatisfactory

Attendance:

- ☐ Regular
- ☐ Irregular

Punctuality:

- ☐ Regular
- ☐ Irregular

Over-all Performance:

- ☐ Outstanding
- ☐ Very good
- ☐ Average
- ☐ Marginal
- ☐ Unsatisfactory

MALONE UNIVERSITY COOPERATIVE EDUCATION/INTERNSHIP STUDENT EVALUATION CONTINUED...

CO-OP /INTERNSHIP EMPLOYER'S WRITTEN EVALUATION

Please give specific examples of particular important assets or areas needing improvement that would be helpful to the student's professional development.

Assets:

Areas needing improvement:

Additional comments:

Is this student eligible to return for another co-op/internship assignment?

☐ Yes

☐ No

If no, please explain:

Has this evaluation been shared with the student?

☐ Yes

☐ No

Student's Signature

Date

Supervisor's Name (Please Print)

Supervisor's Signature

Date