



Please mail completed form to International Advisor, 2505 Augustine Dr., Suite 100, Santa Clara, CA, 95054.

Student Name _____
Last
First
Middle

Company Name _____

Address _____
Street
City
State
Zip

Supervisor _____ Phone _____

Term _____ Start Date of Internship _____ Finish _____

1. In which department of your company did this intern work? Briefly specify duties.

2. How would you evaluate the intern's various job skills as they apply to positions in the department in which the internship was conducted?

3. Describe the intern's quality of work.

4. How would you evaluate the student's understanding of his/her area of study?

5. Indicate professional and personal qualities observed

Please use the following system: 5-excellent; 4-above satisfactory; 3-satisfactory; 2-fair; 1-poor, N/A-not applicable

Initiative _____	Dependability _____
Attitude _____	Communication skills _____
Writing ability _____	Organizational skills _____
Potential in this line of work _____	Other _____

continues on back...

6. Was this intern's skill level adequate to your needs?

At the beginning of the internship Yes No

Midway through the internship Yes No

At the end of the internship Yes No

If not adequate, what other training did/would you suggest?

7. How many hours per week did the intern work? _____ hours

8. Was the schedule satisfactory? Yes No

If not, what would you suggest to improve the schedule?

9. Was this intern's work of real value to you? Yes No

10. Additional comments:

If you would have to grade this intern, what grade do you think this student deserves? (please circle):

A - Excellent

B - Good

C - Satisfactory

D - Poor

F - Fail

Supervisor's Name _____ Signature _____

Title _____ Date _____