

Internship Employer Evaluation

NSCC Internship Program • 9600 College Way North, Seattle WA 98103-3599 • (206) 527-3686 • ksimmons@sccd.ctc.edu

Student Information *(to be completed by student)*

Midquarter Evaluation Final Evaluation

Student _____ Phone _____ E-mail _____

Company _____ Internship title _____

Employer Information *(to be completed by employer)*

Supervisor Name _____ Title _____

Supervisor Telephone _____ Fax _____ E-mail _____

Supervisor, please complete the evaluation of your intern. Discuss the completed evaluation with the intern. The intern is responsible for handing in the completed evaluation to the instructor. This evaluation is incorporated into the student's internship grade.

4=Excellent 3=Very Good 2=Average 1=Needs Improvement 0=Poor

Punctuality	4	3	2	1	0	Attitude	4	3	2	1	0
Arrives at work on time						Enthusiastic about work					
Meets work deadlines						Has professional manner					
Attends work regularly						Shows initiative					
Arranges time off in advance						Deals with routine tasks					
Quality of Work	4	3	2	1	0	Human Relations	4	3	2	1	0
Performs quality work						Comfortable making decisions					
Checks work for errors						Works well in a group					
Budgets time carefully						Overall communications skills					
Performs under pressure						Accepts supervisor suggestions					

Briefly describe the student's strengths and weaknesses.

Did the student complete the learning objectives? How well? If midquarter, has satisfactory progress been made?

Were there any unexpected circumstances that prevented the student from meeting the learning objectives?

What recommendations do you have to better prepare this student for the career s/he has chosen?

Do you intend to hire the student as a regular employee? Yes No Effective date: _____

Would you like the Internship Office to recruit another student? Yes No

Student Signature _____ Date _____

Employer Signature _____ Date _____



North Seattle Community College does not discriminate on the basis of race, color, religion, national origin, gender, sexual orientation, age, marital status, or disability. The following people are designated to handle inquiries: for Section 504/ADA, call Suzanne Sewell at (206) 527-3697; for Title IX, call Cariayna Napoli at (206) 528-4591.

Send completed document to Internship Office.