

INTERN EVALUATION FORM

INSTITUTE FOR SCHOLARSHIP IN THE LIBERAL ARTS

UROP INTERNSHIP PROGRAM

Organization: _____

Intern Name:		Date:	
Evaluation Period			
From:		To:	
Describe Assigned Work:			

Please answer the following:			
YES	NO		
		1.	I have informed intern of what is expected for the next two weeks of work.
		2.	Intern has completed the work I have assigned to my satisfaction.
		3.	Intern completes work accurately and thoroughly.
		4.	Intern, in general, finishes work in a timely manner and has the ability to work under pressure.
		5.	Intern understands assignments, follows instructions and takes initiative.
		6.	Intern has the ability to adjust to non-routine assignments and make decisions.
		7.	Intern works independently, keeps constructively busy and mentally alert.
		8.	Intern has healthy attitude and is cooperative in working with staff.
		9.	Intern exhibits diligence and perseverance; performs tasks with industry and drive.
		10.	Intern accepts responsibility; is trustworthy and conscientious.
		11.	Intern shows up for work on time, as scheduled.
Signature/Title			Date: