

## MIDTERM SUPERVISOR EVALUATION

Date:

Intern Name:

Supervisor Name:

Agency:

*This form, when completed, will only be viewed by the Faculty Supervisor. The student you have been supervising will not see this form unless you specifically request that it be made available to him or her. Allow student access? Yes  No*

Please evaluate your intern's development in the following areas by circling the number that corresponds to your assessment. If any areas do not apply to your situation, write N/A on the line. Feel free to make additional comments on the back of this page.

*1 is not at all competent .... 5 is very competent*

*Comments/Examples*

- |   |                            |                            |                            |                            |                            |                              |  |
|---|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|------------------------------|--|
| 1) Accurate and thorough                            | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 | <input type="checkbox"/> 3 | <input type="checkbox"/> 4 | <input type="checkbox"/> 5 | <input type="checkbox"/> N/A |  |
| 2) Able to work under pressure                      | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 | <input type="checkbox"/> 3 | <input type="checkbox"/> 4 | <input type="checkbox"/> 5 | <input type="checkbox"/> N/A |  |
| 3) Effective in oral communications                 | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 | <input type="checkbox"/> 3 | <input type="checkbox"/> 4 | <input type="checkbox"/> 5 | <input type="checkbox"/> N/A |  |
| 4) Effective in written communications              | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 | <input type="checkbox"/> 3 | <input type="checkbox"/> 4 | <input type="checkbox"/> 5 | <input type="checkbox"/> N/A |  |
| 5) Effective in preparing and organizing work       | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 | <input type="checkbox"/> 3 | <input type="checkbox"/> 4 | <input type="checkbox"/> 5 | <input type="checkbox"/> N/A |  |
| 6) Takes initiative: a self starter                 | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 | <input type="checkbox"/> 3 | <input type="checkbox"/> 4 | <input type="checkbox"/> 5 | <input type="checkbox"/> N/A |  |
| 7) Able to adjust to non-routine assignments        | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 | <input type="checkbox"/> 3 | <input type="checkbox"/> 4 | <input type="checkbox"/> 5 | <input type="checkbox"/> N/A |  |
| 8) Keeps constructively busy and mentally alert     | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 | <input type="checkbox"/> 3 | <input type="checkbox"/> 4 | <input type="checkbox"/> 5 | <input type="checkbox"/> N/A |  |
| 9) Cooperative in working relationships with others | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 | <input type="checkbox"/> 3 | <input type="checkbox"/> 4 | <input type="checkbox"/> 5 | <input type="checkbox"/> N/A |  |
| 10) Able to work without close supervision          | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 | <input type="checkbox"/> 3 | <input type="checkbox"/> 4 | <input type="checkbox"/> 5 | <input type="checkbox"/> N/A |  |

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Supervisor's signature

\_\_\_\_\_  
Date