**WCPSS School to Career Internship Program**

**student Internship evaluation**

The following questions are designed to help you summarize the internship experience. You may draw from your journal entries. **Please answer these questions at the conclusion of your internship and include within your portfolio.**

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| 1. Student Name: |
| 1. Where did you complete your internship? |
| 1. What occupation specific skills did you observe/practice/learn? |
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|  |
|  |
| 3. What is your overall rating of this program as a learning experience? |
| Excellent: \_\_\_\_\_\_\_\_\_\_ Good: \_\_\_\_\_\_\_\_\_\_ Poor: \_\_\_\_\_\_\_\_\_\_ |
| 4. If you had an excellent or good learning experience, what made it good or excellent? |
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|  |
| 5. If your experience was less than satisfactory, please explain. |
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**Instructions:** The following list describes features of an internship experience. Please describe your particular experience by circling the appropriate number from 1 to 5.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | **Practically Never** | | **Sometimes** | | **Very Often** | |
| 1. Had adult responsibilities | 1 | 2 | 3 | 4 | | 5 |
| 1. Had challenging tasks | 1 | 2 | 3 | 4 | | 5 |
| 1. Made important decisions | 1 | 2 | 3 | 4 | | 5 |
| 1. Offered input that was accepted | 1 | 2 | 3 | 4 | | 5 |
| 1. Did interesting tasks | 1 | 2 | 3 | 4 | | 5 |
| 1. Performed tasks instead of observing | 1 | 2 | 3 | 4 | | 5 |
| 1. Received training to do tasks | 1 | 2 | 3 | 4 | | 5 |
| 1. Received clear instructions | 1 | 2 | 3 | 4 | | 5 |
| 1. Had freedom to develop and use my own ideas | 1 | 2 | 3 | 4 | | 5 |
| 1. Worked with adults who took a personal interest in me | 1 | 2 | 3 | 4 | | 5 |
| 1. Had freedom to explore my own interests | 1 | 2 | 3 | 4 | | 5 |
| 1. Had a variety of tasks to do | 1 | 2 | 3 | 4 | | 5 |
| 1. Received help when needed | 1 | 2 | 3 | 4 | | 5 |
| 1. Was appreciated when I did a good job | 1 | 2 | 3 | 4 | | 5 |
| 1. Received feedback about my performance | 1 | 2 | 3 | 4 | | 5 |
| 1. Felt I made a contribution | 1 | 2 | 3 | 4 | | 5 |
| 1. Applied things I learned in school to my internship | 1 | 2 | 3 | 4 | | 5 |
| 1. Achieved my original goals for this internship | 1 | 2 | 3 | 4 | | 5 |

What have you learned or what areas have furthered your development as a result of your internship? Evaluate your experiences and check the appropriate response for each question.

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| --- | --- | --- | --- |
| **Have You Gained:** | **Yes** | **No** | **Don’t Know** |
| 1. Realistic attitudes toward other people such as elderly, handicapped, government official, professional, etc? |  |  |  |
| 1. Self-motivation to learn, participate and achieve? |  |  |  |
| 1. Self-concept (sense of confidence, competence and awareness)? |  |  |  |
| 1. Willingness to try new experiences? |  |  |  |
| 1. Sense of usefulness in relation to community? |  |  |  |
| 1. Assertiveness and independence? |  |  |  |
| 1. Ability to accept consequences of your actions? |  |  |  |
| 1. Knowledge of community organizations? |  |  |  |
| 1. Responsibility for your life? |  |  |  |
| 1. Awareness of community problems? |  |  |  |
| 1. Awareness of community resources? |  |  |  |
| 1. Realistic ideas about the world of work? |  |  |  |
| 1. Knowledge about a variety of careers? |  |  |  |
| 1. More efficient use of leisure time? |  |  |  |
| 1. Ability to narrow career choices? |  |  |  |

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| Student Intern Date | Internship Coordinator Date |