**BHS School to Career Internship Program**

**ORGANIZATION SUPERVISOR INTERN EVALUATION**

Intern’s name:

Number of hours worked: n/a Organization:

Supervisor Name & Title:

Brief description of intern’s experiences:

**Note to sponsor:** This form was developed to help the Internship Coordinator assign the student’s academic credit. It is suggested that you share this evaluation with the student intern before sending to the Internship Coordinator. We realize that not all categories listed below may be applicable to this particular internship. Please check only those items you feel comfortable evaluating. Thank you for your assistance and cooperation.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Personal Qualities** | **Excellent** | **Above****Average** | **Average** | **Below****Average** | **Not****Applicable** |
| Accepts and fulfills responsibilities |  |  |  |  |  |
| Exercises good judgment |  |  |  |  |  |
| Is friendly and courteous |  |  |  |  |  |
| Accepts and understands the needs, feelings, and faults of others |  |  |  |  |  |
| Is accepted well by other employees |  |  |  |  |  |
| Is dependable |  |  |  |  |  |
| Is willing to accept suggestions |  |  |  |  |  |
| Conscientious in fulfilling assignments |  |  |  |  |  |
| Follows directions |  |  |  |  |  |
| Work is neat and accurate |  |  |  |  |  |
| Is honest and sincere |  |  |  |  |  |
| Reports to site on time |  |  |  |  |  |
| Calls if unable to attend |  |  |  |  |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Is cooperative and industrious |  |  |  |  |  |
| Is creative |  |  |  |  |  |
| Shows initiative |  |  |  |  |  |
| Is flexible and adaptable |  |  |  |  |  |
| Oral communication skills |  |  |  |  |  |
| Written communication skills |  |  |  |  |  |
| Personal Appearance |  |  |  |  |  |

Please evaluate overall performance:

Circle one: 10 9 8 7 6 5 4 3 2 1

 Excellent Above Average Average Below Average

What are the student’s major professional assets and strengths?

What are the student’s major professional development needs?

Did the student have adequate organizational/management skills? If not, please elaborate.

Do you know of any other organizations that may be interested in supporting School-To-Career programs such as internships and work-based learning?

Additional Comments:

Supervisor’s signature Date

Will you or your organization be interested in hiring future interns?

If you are not the contact person, who is? \_\_\_\_\_\_

Please check one box below:

 Please **share** this evaluation with the intern.

 Please **do not** share this evaluation with the intern.

This form may be completed electronically and emailed to Rebecca Davis (rdavis9@wcpss.net) or can be mailed to:

Broughton High School

Attn: Rebecca Davis, Career Development Coordinator

723 St. Mary’s St.

Raleigh, NC 27605

**Please Return by:**

1st Evaluation- October 30, 2017

2nd Evaluation- January 19, 2018

3rd Evaluation- March 28, 2018

4th Evaluation- May 31, 2018

If comfortable, you may give the completed form to your intern to turn in to the internship coordinator. Please place the evaluation in a sealed envelope and sign the back flap.