

**POLITICAL SCIENCE INTERNSHIP  
PSC 2987 Internship Supervisor Evaluation**

**Please note:** In order for the student to receive credit for his/her internship, this evaluation must be returned to me by Tuesday 1 May

Please mail, fax, or email the completed form.

Student Name:

Name of Organization:

Supervisor Name:

Phone: (

Internship Start Date:

Internship End Date:

\*Total Number of Hours Worked: \_\_\_\_\_

On a scale from 1 (poor) to 5 (excellent), please evaluate the student's performance during the internship with respect to the following criteria:

1. Dependability  
*(Comments)*

5. Works Effectively with Others  
*(Comments)*

2. Work Ethic  
*(Comments)*

6. Quantity of Work Produced  
*(Comments)*

3. Attendance / Punctuality  
*(Comments)*

7. Quality of Work Produced  
*(Comments)*

4. Usefulness to the Organization  
*(Comments)*

8. Level of Initiative  
*(Comments)*

9. Please identify a specific project or situation for which the intern was responsible and comment on his/her performance
10. Please list any overall recommendations for improvement in the student's performance.
11. From your perspective, was the student's internship a good learning experience for him/her?  
Yes \_\_\_\_\_ No \_\_\_\_\_ (Why?)
12. Do you feel that it is appropriate for the student to earn academic credit based on his/her performance? Yes \_\_\_\_\_ No \_\_\_\_\_ (Why?)
13. Overall, was the student's performance satisfactory? Yes \_\_\_\_\_ No \_\_\_\_\_ ( If no, why not?)
14. Additional Comments or Observations:
15. Have you discussed this evaluation with your student? Yes \_\_\_\_\_ No \_\_\_\_\_  
(Do you want this evaluation to be confidential? Yes \_\_\_\_\_ No \_\_\_\_\_ )
16. Would you be interested in having another GW intern work for you? (Yes \_\_\_\_\_ No \_\_\_\_\_)