



Steven J. Green
School of International
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Department of Public Policy & Administration

Internship Faculty Supervisor:

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FINAL 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 to this evaluation?

Yes No

Please rate the following:

1 is not favorable 5 favorable

Intern cooperative?

1 2 3 4 5 N/A

Intern productive?

1 2 3 4 5 N/A

Intern managed time efficiently?

1 2 3 4 5 N/A

Intern work on own initiative?

1 2 3 4 5 N/A

Intern communicated well orally?

1 2 3 4 5 N/A

Intern communicated well in writing?

1 2 3 4 5 N/A

Please answer the following:

1. Was the intern academically prepared for this internship? Please identify any deficiencies.

2. What aspects of the intern's overall performance were most positive?

3. What aspects of the intern's overall performance most needed improvement?

4. Were there major changes in the project from what was originally conceived?

Yes No If yes, please explain.

5. Was a written report or publication required by the internship?

Yes No If yes, has the report been submitted? Yes No

6. Has the intern successfully completed the objectives outlined in the contract?

Yes No If no, please explain.

7. Do you plan to sponsor interns in the future?

Yes No If yes, when? Fall Spring Summer Continuously

8. Would you recommend this internship program to other agencies? Yes No

Can you suggest any divisions in your own agency, or other agencies, that might be interested in sponsoring an intern? Please list agency names and contacts on the reverse side of this form.

9. Additional comments.

Supervisor's signature

Date