

BI 410 INTERNSHIP SUPERVISOR EVALUATION

Thank you for supervising a BI 410 student intern. As part of the student's evaluation, we are soliciting your comments on his or her performance. Please evaluate the students in the areas listed below based on your experience with the student and the responsibilities and expectations outlined in the Internship Approval Form you completed with the student. Please complete this evaluation by Friday of the final week of the term (10th week) the student is registered for BI 410. If the student is graduating at the end of the term, please submit this evaluation by the Friday of the 6th week. Students may request access to this evaluation.

Please return this signed form in one of the following ways:

Mail: 3029 Cordley Hall, Corvallis OR 97331

Fax: 541-737-0501

E-mail: ib@science.oregonstate.edu

Student's Name

Internship Title

_____ to _____
Dates of Internship

Name of Organization

Please rate the following areas based on your experience with the student and the responsibilities and expectations outlined in the Internship Approval Form completed with the student.

	Poor → Average → Outstanding					No basis for opinion
	1	2	3	4	5	
Writing skills: concise, informative, neat						
Verbal skills: clarity, coherence						
Interpersonal skills: capacity for team work						
Technical skills: instruments, field or lab methods						
Biological Knowledge						
Completion of assigned tasks						
Punctuality and attendance						

Please elaborate on any of the items above you feel were important during the internship, particularly areas where the student improved or still has significant room for improvement.

Please respond to the following questions and provide comments based on your experience with the student and the responsibilities and expectations outlined in the Internship Approval Form completed with the student.

How did the student fulfill the responsibilities and expectations outlined in the Internship Approval Form? If not, what did they fail to fulfill?

How would you judge the student's ability to function in a professional environment? How did this change over the course of the internship?

Did you provide the intern feedback about their performance?

Overall impression: Please comment on this student's suitability for a career or employment in your field or organization. Please provide us with any additional comments or outstanding attributes, abilities, areas of improvement, etc.

Supervisor's Name

Supervisor's Signature

Title

E-mail

Phone