



Office of the Registrar

One University Hill Drive • Buena Vista, VA • 24416 • Phone: (540) 261-4343 • Fax: (540) 261.4245

Agency Intern Evaluation Form

Student Name: _____ Date: _____

University Advisor: _____ Phone: _____

Agency Supervisor: _____ Phone: _____

Agency: _____

Agency Address: _____

Nature of Assignment: _____

Notice: Because this evaluation is a factor in determining this individual's grade, it is part of the student's "education record" under the Family Education Rights and Privacy Act. Under this law, the individual has a legal right to examine all evaluations and provide written response.

Dates of Experience: _____ to _____

RATING OF STUDENT

Key: 5 Excellent 4 Very Good 3 Average 2 Marginal 1 Unsatisfactory

Note: Please rate the student on the following items by circling the appropriate number.

PERSONAL QUALITIES

1. Personal Appearance.....	5	4	3	2	1
2. Effective communication.....	5	4	3	2	1
3. Interest and enthusiasm.....	5	4	3	2	1
4. Poise.....	5	4	3	2	1
5. Initiative.....	5	4	3	2	1
6. Dependability.....	5	4	3	2	1
7. Willingness to study and learn new things.....	5	4	3	2	1
8. Demonstrated professional growth during experience.....	5	4	3	2	1

Comments:

PROFESSIONAL COMPETENCE AS EVIDENCED BY

- 1. Job knowledge, understanding of job assignments..... 5 4 3 2 1
- 2. Quality of work, well organized, consistent, reliable, uses good techniques..... 5 4 3 2 1
- 3. Quantity of work, plans well, productive..... 5 4 3 2 1
- 4. Positive and cooperative attitude 5 4 3 2 1
- 5. Good judgment and logic..... 5 4 3 2 1

Comments:

HUMAN RELATIONS

- 1. Harmonious relationship with colleagues..... 5 4 3 2 1
- 2. Rapport with clients/customers..... 5 4 3 2 1
- 3. Ability to accept criticism and analysis..... 5 4 3 2 1
- 4. Cooperation with supervisors and colleagues..... 5 4 3 2 1

Comments:

OUTSTANDING QUALITIES OR SPECIAL SKILLS AND ABILITIES OF THIS STUDENT:

SPECIFIC AREAS IN WHICH STUDENT NEEDS FURTHER DEVELOPMENT:

PREDICTION OF STUDENT’S ABILITY AS A FUTURE LEADER IN THIS FIELD:

Excellent Very Good Average Marginal Unsatisfactory

Signature of Supervisor

Date

Please do not give this completed form to student. Please mail directly to:

**Southern Virginia University
Office of the Registrar
One University Hill Drive
Buena Vista, VA 24416**