Nicholls State University
Al Danos College of Business Administration
Evaluation Rating Form of Student Intern
Mid-Term & Final Evaluation Form

STUDENT'S NAME: _____ DATE DUE: _____

NAME OF SUPERVISOR: _____ WORKSITE: _____

DIRECTIONS: Please evaluate the student employee for each criterion shown below. If the criterion does not apply or if you do not have sufficient information, please check the column marked "N" for no evaluation. Check each characteristic as follows:

A—Excellent **C—Average** **E—Poor**
B—Above Average **D—Below Average** **N—No Evaluation**

ITEMS TO BE EVALUATED	A	B	C	D	E	N
ATTITUDE TOWARDS THE JOB: Is enthusiastic about work; active and energetic; is courteous, cheerful and interested; is able to take instructions cheerfully.	☐	☐	☐	☐	☐	☐
ATTENDANCE/DEPENDABILITY: Is trustworthy, punctual, reliable; fulfills responsibilities; has good attendance.	☐	☐	☐	☐	☐	☐
APPEARANCE: Is neat, clean, suitably dressed, poised and maintains good posture.	☐	☐	☐	☐	☐	☐
COMMUNICATION SKILLS: Expresses ideas clearly and concisely both orally and in writing.	☐	☐	☐	☐	☐	☐
COOPERATION: Has ability to work with fellow workers, supervisors, and others.	☐	☐	☐	☐	☐	☐
POTENTIALITY: Degree of potentialities for future improvement and development.	☐	☐	☐	☐	☐	☐
QUALITY OF WORK: Is accurate, thorough, acceptable.	☐	☐	☐	☐	☐	☐
QUANTITY OF WORK: Has ability to do a comparatively large amount of work of above-average quality.	☐	☐	☐	☐	☐	☐
PERFORMANCE ON THE JOB: Has knowledge and ability for work and background to do work.	☐	☐	☐	☐	☐	☐

ADDITIONAL COMMENTS: (Indicate strengths and/or weaknesses)

_____ _____
Supervisor's Signature Date