SUPERVISOR EVALUATION OF STUDENT IN SCHOOL ONE INTERNSHIP

At the completion of the agreed on number of hours/days of participation, please evaluate student performance in terms of your expectations and needs as well as those outlined by School One in the initial internship agreement. Please type this form and email to caryh@school-one.org and/or the advisor.

Student Name			
Site Name (and function if not obvious from	name)		
Mentor/supervisor			
Period beginning	and ending		
Total number of hours of internship performa	ance		
Please comment on the student's performa	ance in the following areas:		
1. Working with time: attendance, time	ly arrival and completion of tasks:		
2. Skills acquired during the internship			
3. Areas of success and/or failure at tas	sks:		

4.	Cooperation with staff and other clients/customers:
5.	Respect for others, their work and ideas:
6.	Interest and work ethic:
7	Shill in communicating and interacting with staff and others.
1.	Skill in communicating and interacting with staff and others:
	recommend credit or no credit based on the student's performance and add any
comme	nts you feel are necessary but not covered above if there are any: