Career Development Center

Bowie State University

Student Evaluation of Internship Assignment

Complete this form which evaluates your relationship with your employer, your work environment and your work assignment.

		Student ID: _	Student ID:		
		Student Phone Number:			
Major:					
Emplo	yer:				
Superv	visor:		Supervisor	Phone Number:	
Salary/Hourly		Hours/wk		Overtime	YesNo
Superv 1.	Does your super	visor give or provide	e adequate training?Sometimes	Seldom	
2.		visor motivate you toFrequently	o improve yourself?Sometimes	Seldom	
3.			s or assistance from your suSometimes		ance of your work?
4.			uss your job performance v		
5.	•	•	th feedback on assignmentSometimes		
6.	• 1 1	to date on companyFrequently	programs?Sometimes	Seldom	

Comments:

Environment 1. Are you kept busy doing tasks related to your major? ___Frequently ___Sometimes ____ Always Seldom 2. Is the organization supportive to its employees? ___Sometimes ____ Always ___ Frequently Seldom 3. How would you rate this agency's /company's employee relations? ___Good ___Average ___Poor Excellent 4. Are you encouraged to get involved in company activities? ____ Always ___ Frequently ___Sometimes Seldom **Comments:** Work 1. Do you feel your present position provides relevant experience? ____ Always ___Frequently ____Sometimes Seldom 2. Do you feel you are performing work of value to your employer? ___Sometimes ____ Always ___Frequently 3. How would you rate your academic preparation for this assignment? ___Average ____Poor ___Good 4. How would you evaluate your understanding of your job assignment? ___Good Excellent Average Poor 5. Does the work atmosphere allow for the expression of your ideas? ___Sometimes ____ Always ____ Frequently 6. Did you initiate discussion with your supervisor regarding your duties? Yes No **Comments:**

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1.	Have you contacted the Career Development Center regarding any unsatisfactory job situation?						
	Yes	No	N/A				
2.	Has the Career Development Center assisted you with any job-related problems?						
	Yes	No	N/A				

Comments:

Name:	Date: