

## INR 4943 International Studies Internship Site Supervisor Evaluation Form

Student Name:	Date:
Site Supervisor/Evaluator:	
Organization Name:	
First Day of Internship:	Last Day of Internship:

The final evaluation should be shared with the student. Your discussion of the evaluation with the student is an opportunity to enhance the student's personal and professional growth, based upon the feedback.

# As a guideline, the following categories have been established:

OUTSTANDING - Indicates exceptional achievement VERY GOOD - Indicates extensive achievement SATISFACTORY - Indicates acceptable achievement NEEDS IMPROVEMENT - Indicates minimal achievement NOT APPLICABLE

### I. PROFESSIONAL PERFORMANCE

Please comment on any or all of the following:

 Able to establish work goals
 Successful in achieving goals and planning work to be accomplished
 Displays ability to organize responsibilities
 Possesses skills commensurate with academic level
 Demonstrates objectivity regarding own performance and quality of work
 Displays capacity to motivate others
 Demonstrates ability to actively listen and communicate ideas
 Strives for quality in written expression
 Other:

### II. PROFESSIONAL KNOWLEDGE

Please comment on any or all of the following:

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	_Displays ability to integrate conceptual knowledge and professionally related skills
	_ Displays knowledge and understanding or program principles and methods
	_ Demonstrates ability to apply knowledge in a practical manner
	_ Demonstrates ability to think independently
	_Possesses a wide variety of interests
	Displays expanding scope of interests and willingness to learn
	_Other:

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#### **III. PROFESSIONAL PERSONALITY**

Please comment on any or all of the following:

_ Displays enthusiasm
_Exhibits pleasant, tasteful personal appearance
_ Is courteous and tactful
_Exhibits professional voice quality, speech presentation, tone and inflection
_ Displays mature judgment
_ Consistent and fair with interpersonal relationships in the workplace
_ Demonstrates flexibility
_Other:

## **IV. PROFESSIONAL ATTITUDE**

Please comment on any or all of the following:

 Displays initiative and imagination
 Displays zeal for the profession
 Accepts assignments willingly
 Upholds departmental policies
 Demonstrates positive relationships with organization's staff members
 Accepts suggestions, direction and critical evaluation
 Offers opinions and suggestions at appropriate times/place
 _Other:

### **COMMENTS**

Space is provided below for additional comments concerning this evaluation. If more space is needed, please attach a sheet or use the back of this form.

Student's Signature:	Date:
Site Supervisor's Signature:	Date :
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