



# Internship Experience Rating Form

This form is to be completed by the Employer at the end of the internship period and provided to the student.

Students Name: \_\_\_\_\_

Firm/ Business Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Employment Date: Start: \_\_\_\_\_ End: \_\_\_\_\_

**Total Hours Worked During Internship:** \_\_\_\_\_

**Chief Duties of Intern (Be Specific):** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please Evaluate the student objectively, comparing with other students of comparable academic level, with other personnel assigned to the same or similarly classified jobs, or with individual standards.

**Relations with Others:**

- Exceptionally well accepted
- Works well with others
- Gets along satisfactorily
- Has some difficulty working with others
- Works very poorly with others

**Attitude- Application to Work**

- Outstanding in Enthusiasm
- Very interested and industrious
- Average in diligence and interest
- Somewhat indifferent
- Definitely not interested

**Judgment:**

- Exceptionally mature
- Above average in making decisions
- Usually makes the right decision
- Often uses poor judgment
- Consistently uses bad judgment

**Dependability:**

- Completely dependable
- Above average in dependability
- Usually Dependable
- Sometimes neglectful or careless
- Unreliable

**Ability to Learn:**

- Learns very quickly
- Learns readily
- Average in learning
- Rather slow to learn
- Very slow to learn

**Quality of Work:**

- Excellent
- Very good
- Average
- Below average
- Very poor

**Attendance:**  Regular  Irregular

**Punctuality:**  Regular  Irregular

**Overall Performance:** \_\_\_ Outstanding \_\_\_ Very good \_\_\_ Average \_\_\_ Marginal \_\_\_ Unsatisfactory

**In what ways can the student improve:** \_\_\_\_\_

**Additional Remarks:** \_\_\_\_\_

**THIS REPORT WAS SUBMITTED BY THE STUDENT TO THE INTERNSHIP DIRECTOR AS EVIDENCE OF COMPLETION OF A SUCCESSFUL INTERNSHIP.**

Supervisor's Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Job Title: \_\_\_\_\_

Date: \_\_\_\_\_

Telephone/Email: \_\_\_\_\_

Would you be interested in another intern from the Florida State University College of Business?

\_\_\_yes

\_\_\_no

\_\_\_maybe, please contact me with further information

Please Return to:

Lauren A. Dalton  
Director of Internship Programs  
The College of Business- Rovetta 314D  
Florida State University  
(850) 644-8495  
ldalton@cob.fsu.edu