Department of Exercise Science
Internship Evaluation Form
(To be completed by intern)

Name of Intern_____ Semester _____
(Last, First, Middle)
Name of Internship Supervisor_____

Internship Organization _____

Address_____

Phone number_____fax number_____

Email address _____

Questions for the intern? Please **circle** one answer.

5 – ***Outstanding*** performance
4 – Consistent ***High Quality*** performance
3 – ***Satisfactory*** performance
2 – Inconsistent ***Low Level*** performance
1 – ***Unsatisfactory*** performance
N – Not observed

Supervising Instructor Evaluation

1. Provides a clear orientation during first day(s) of placement	1 2 3 4 5 N
2. Is a positive professional role model for students	1 2 3 4 5 N
3. Demonstrates self-confidence as a professional	1 2 3 4 5 N
4. Keeps up with the current research and trends in Exercise Science	1 2 3 4 5 N
5. Admits to student when he/she does not know the answer	1 2 3 4 5 N
6. Follows up on his/her lack of knowledge in a timely manner	1 2 3 4 5 N
7. Cares about student learning	1 2 3 4 5 N
8. Assists students in understanding their professional responsibilities	1 2 3 4 5 N
9. Provides feedback to students in a timely manner	1 2 3 4 5 N
10. Corrects students tactfully in an appropriate location/place	1 2 3 4 5 N
11. Encourages students to ask questions	1 2 3 4 5 N

Site Evaluation

12. The internship site provided me with a stimulating learning environment.	1 2 3 4 5 N
13. The internship site provided me with challenges that I could utilize my skills.	1 2 3 4 5 N
14. The experiences I encountered during my internship reinforced the information and skills I learned in my coursework.	1 2 3 4 5 N
15. Was this the internship experience what you expected?	1 2 3 4 5 N
16. Did it help you achieve your educational and career goals?	Yes No
17. The Department of Exercise Science should continue this internship site.	Yes No

Additional Questions

1. What courses and subject matter from your classes seemed most pertinent to your work responsibilities as an intern?

2. What courses, subject matter, skills, competencies and/or abilities do you NOT have that would have been helpful in this internship experience?

3. Given your thoughts, what suggestions (steps, policies, content, skills, etc.) can you recommend our program incorporate?

4. Were there any housing and/or transportation issues or concerns?

5. Did you receive a stipend and if so, how much?_____

6. Was there an offer of employment that resulted from the internship?

7. How will you use your internship experience and the Exercise Science degree in the future?

General Evaluation: Internship Site's overall rating: (please check one of following)

_____Poor _____Satisfactory _____Good _____Very good _____Outstanding

Rated by_____ _____

Intern's Signature Date