Northern Illinois University WOMEN'S & GENDER STUDIES INTERNSHIP AGENCY EVALUATION OF INTERNSHIP STUDENT

| Agency Name: | | | | | | | | | | | | |
|-----------------------|------------|-------|-------|--------|----------|--------|---------|---------|--------|--------|-----------|--|
| Supervisor Name: | | | | | | | | | | | | |
| 1. Please rate the st | udent with | respe | ct to | the fo | llowin | g by c | ircling | g the a | approp | oriate | number. | |
| | N/A | Poor | | | Adequate | | | Good | | | Excellent | |
| Quality of work | N/A | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | |
| Relations with others | N/A | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | |
| Dependability | N/A | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | |
| Interest & enthusiasm | N/A | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | |
| Judgment | N/A | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | |
| Oral communication | N/A | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | |
| | | | | | | | | | | | | |

3

4 5 6 7

4 5 6 7

4 5 6 7 8

10

10

10

9

2. *What were the student's major strengths?

N/A

Student Name:

3. *In what areas would you say the student most needs to grow?

N/A 1 2

1

1 2 3

2 3

- 4. *Would you hire this student to work in your organization? Why or why no?
- 5. *Other comments:

Written communication

OVERALL EVALUATION

Leadership

Return to: Center for the Study of Women, Gender & Sexuality, Northern Illinois University, ATTN: Director, Reavis 103, DeKalb, IL 60115; or FAX to 815-753-1074; or EMAIL to wgs@niu.edu

Thank you for your efforts on behalf of NIU's Center for the Study of Women, Gender & Sexuality interns!

^{*}Use additional sheets if necessary.