

*Honors Cooperative Internship
Program*

Supervisor Evaluation of Student Intern

CONFIDENTIAL

Note to supervisor:

1. Please complete the form, print a hardcopy, sign, and then give the signed form to your student/intern for submission to the Honors Co-Op office.
2. This evaluation becomes part of the student's academic report. Please discuss this report with the student/intern before signing. Thank you.

Student Name:		Summer <input type="checkbox"/> Fall <input type="checkbox"/> Spring <input type="checkbox"/>		
Company Name				
Supervisor Name				
Date of this form	Month	Day	Year	
Supervisor Position				
Supervisor Phone		Email		

Please evaluate the individual's performance by checking the rating on the right. If you had no opportunity to evaluate specific ability, please check "Not Applicable"	Not Applicable	Truly exceptional	Above expectation	As expected	Below expectation
1. Ability to follow instructions.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Ability to apply knowledge of engineering/ software engineering in completing assignments.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Ability to design or conduct experiments to meet objectives, as well as analyze and interpret data.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Ability to identify, formulate and solve engineering or software problems (design/ test/ implementation, etc.).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Ability to function as a team member.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Ability to communicate effectively: verbally and in writing.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Ability to learn new tools and techniques.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Ability to follow professional and ethical responsibilities.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

PLEASE COMPLETE ALL SECTIONS:

Brief summary of work performed:

List areas in which the individual needs to improve, if any:

Student's Signature

Date

Supervisor's Signature

Date