University of Arizona
STUDENT’S INTERNSHIP EVALUATION FORM
(To be completed by the Intern)

This form is for you (the student) to assess your internship experience. At the conclusion of the internship, by the end of the semester or summer term, complete this form and give it to the journalism internship coordinator.

Intern Name: ____________________________

Sponsoring Organization: ____________________________

Sponsoring Supervisor: ____________________________

Internship Coordinator: Lisa Button

Internship Department: Journalism

Course Number and Section: Jour 493

Semester(s) of Internship: ____________________________

Circle the number that best reflects your level of agreement/disagreement with each of the following statements. 1 = Strongly Agree; 5 = Strongly Disagree

I achieved my learning goals during the internship. 1 2 3 4 5

Through my duties, I received training in a profession/field related to my studies. 1 2 3 4 5

I experienced some of the realities of working in the profession/field. 1 2 3 4 5

I successfully completed my assigned responsibilities and duties. 1 2 3 4 5

Evaluate the following aspects of your internship by circling the number that best reflects your experience. If the aspect does not apply, leave it blank. 1 = Outstanding; 5 = Unsatisfactory

Work Environment:

Clarity of organizational structure 1 2 3 4 5

Access to necessary materials and/or equipment 1 2 3 4 5

Collegiality/friendliness of the employees 1 2 3 4 5

Attitude of respect for interns 1 2 3 4 5

Support and Feedback:

From your supervisor 1 2 3 4 5

From other employees with whom you interacted 1 2 3 4 5

Opportunity to be Creative:

Willingness of others to consider to your ideas 1 2 3 4 5

Interaction with Others:

Opportunity to contribute to a team project 1 2 3 4 5

Questions were encouraged and answered. 1 2 3 4 5

Access to one or more mentors (supervisor or employees) 1 2 3 4 5

Overall Evaluation of Internship (circle one): Superior Excellent Satisfactory Unsatisfactory

Additional Comments:

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________________________________________________________________________________

________________________________________________________________________________

Intern’s Signature ____________________________ Date ____________________________