

# INTERNSHIP IN STUDENT AFFAIRS SITE EVALUATION FORM

**Directions:** This form is to be completed by the student intern and given to the faculty supervisor upon completion of requirements.

Internship Site: \_\_\_\_\_

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

\_\_\_\_\_

Telephone: \_\_\_\_\_

Site Host: \_\_\_\_\_

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

E-mail Address: \_\_\_\_\_

PLEASE USE THE FOLLOWING SCALE TO RATE YOUR INTERNSHIP EXPERIENCE:

**1 (Strongly Agree), 2 (Agree), 3 (Disagree), 4 (Strongly Disagree)**

My host/site supervisor or other agency personnel:

\_\_\_\_\_ 1. Clearly explained what was expected of me within the context of this experience.

\_\_\_\_\_ 2. Frequently observed me and offered feedback on my performance.

\_\_\_\_\_ 3. Made helpful suggestions regarding my performance.

\_\_\_\_\_ 4. Allowed me the opportunity to experience a broad range of unit activities.

\_\_\_\_\_ 5. Encouraged my involvement in departmental professional development activities.

\_\_\_\_\_ 6. Responded appropriately to my questions, comments, and concerns.

**PLEASE FEEL FREE TO PROVIDE ADDITIONAL COMMENTS. FEEL FREE TO ATTACH AN ADDITIONAL SHEET IF NEEDED.**