

INTERNSHIP EVALUATION FORM

PLEASE EMAIL, MAIL OR FAX TO:

RPTM Internship Staff Assistant
The Pennsylvania State University
College of Health and Human Development
Department of Recreation, Park and Tourism
Management 801 Ford Building
University Park, PA 16802
FAX: (814) 867-1751
PH: (814) 865-1851
EMAIL: Please email directly to Internship Supervisor

PLEASE PRINT

Name of Student _____ Evaluation Date _____

Name of Rater _____

Position or Title _____

Agency _____

Period Covered by Rating: _____ Mid-Internship Evaluation

_____ Final Evaluation

This rating should be made with care and fairness for the interest of the student. Reflect carefully upon the person's work and make an honest judgment of the qualities of the trainee. Base your judgment on the entire period covered and not upon isolated incidents alone. This evaluation is to be made twice during the Internship, and each evaluation should be shared with the student. Your discussion of the evaluation with the student, especially at mid-Internship, is an opportunity to enhance the student's personal and professional growth, based upon the feedback.

As a guideline, the following categories have been established:

- | | |
|-------------------|--|
| OUTSTANDING | <i>Indicates exceptional achievement</i> |
| VERY GOOD | <i>Indicates extensive achievement</i> |
| SATISFACTORY | <i>Indicates acceptable achievement</i> |
| NEEDS IMPROVEMENT | <i>Indicates minimal achievement</i> |

Internship Evaluation Form (Continued)

	OUTSTANDING	VERY GOOD	SATISFACTORY	NEEDS IMPROVEMENT	NOT APPLICABLE	COMMENTS
I. PROFESSIONAL PERFORMANCE						
<input type="checkbox"/> Establish Work Goals						
<input type="checkbox"/> Success in Achieving Goals						
<input type="checkbox"/> Plans Work to be Accomplished						
<input type="checkbox"/> Displays Ability to Organize People and Resources						
<input type="checkbox"/> Completes Assignments On or Before Due Date						
<input type="checkbox"/> Possesses Skills Commensurate with Academic Level						
<input type="checkbox"/> Is Objective Regarding Own Performance and Quality of Work						
<input type="checkbox"/> Displays Capacity to Motivate Others						
<input type="checkbox"/> Conducts Self Well Before Groups						
<input type="checkbox"/> Demonstrates Ability to Communicate Ideas						
<input type="checkbox"/> Strives for Quality in Written Expression						
<input type="checkbox"/> Other: _____						
II. PROFESSIONAL KNOWLEDGES						
<input type="checkbox"/> Displays Ability to Integrate Conceptual Knowledge and Professionally-Related Skills						
<input type="checkbox"/> Displays Knowledge and Understanding of Program Principles and Methods						
<input type="checkbox"/> Demonstrates Ability to Apply Knowledge in a Practical Way						
<input type="checkbox"/> Demonstrates Ability to Think Independently						
<input type="checkbox"/> Possesses a Wide Variety of Interests						
<input type="checkbox"/> Displays Expanding Scope of Interests						
<input type="checkbox"/> Other: _____						

Internship Evaluation Form (Continued)

III. PROFESSIONAL PERSONALITY

	OUTSTANDING	VERY GOOD	SATISFACTORY	NEEDS IMPROVEMENT	NOT APPLICABLE	COMMENTS
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- Is Enthusiastic
- Is Cheerful and Friendly
- Exhibits Pleasant, Tasteful Personal Appearance
- Is Courteous and Tactful
- Exhibits Strong Voice Quality, Speech Presentation, Tone and Inflection
- Displays Sense of Humor
- Displays Mature Judgment
- Is Consistent and Fair With Interpersonal Relationships in the Workplace
- Demonstrates Flexibility
- Displays Concern for Others
- Avoids Distracting or Irritation Mannerisms
- Other _____

IV. PROFESSIONAL ATTITUDE

- Displays Initiative and Imagination
- Displays Zeal for the Profession
- Accepts Assignments Willingly
- Upholds departmental Policies
- Demonstrates Positive Relationships With Agency Staff Members
- Accepts Suggestions, Direction and Critical Evaluation
- Offers Opinions and suggestions at Appropriate Times/Place
- Other: _____

<input type="checkbox"/> Is Enthusiastic						
<input type="checkbox"/> Is Cheerful and Friendly						
<input type="checkbox"/> Exhibits Pleasant, Tasteful Personal Appearance						
<input type="checkbox"/> Is Courteous and Tactful						
<input type="checkbox"/> Exhibits Strong Voice Quality, Speech Presentation, Tone and Inflection						
<input type="checkbox"/> Displays Sense of Humor						
<input type="checkbox"/> Displays Mature Judgment						
<input type="checkbox"/> Is Consistent and Fair With Interpersonal Relationships in the Workplace						
<input type="checkbox"/> Demonstrates Flexibility						
<input type="checkbox"/> Displays Concern for Others						
<input type="checkbox"/> Avoids Distracting or Irritation Mannerisms						
<input type="checkbox"/> Other _____						
IV. PROFESSIONAL ATTITUDE						
<input type="checkbox"/> Displays Initiative and Imagination						
<input type="checkbox"/> Displays Zeal for the Profession						
<input type="checkbox"/> Accepts Assignments Willingly						
<input type="checkbox"/> Upholds departmental Policies						
<input type="checkbox"/> Demonstrates Positive Relationships With Agency Staff Members						
<input type="checkbox"/> Accepts Suggestions, Direction and Critical Evaluation						
<input type="checkbox"/> Offers Opinions and suggestions at Appropriate Times/Place						
<input type="checkbox"/> Other: _____						

Internship Evaluation Form *(continued)*

COMMENTS

Space is provided below for additional comments concerning this evaluation. If more space is needed, please attach a sheet or use the back of this form.

STUDENT'S COMMENTS

RATER'S COMMENTS

SUMMARY OF EVALUATION CONFERENCE (complete by rater)

PLEASE COMPLETE THE FOLLOWING TO VERIFY STUDENT'S PARTICIPATION IN INTERNSHIP.

This is to verify that, at the time of this evaluation, this student has completed

_____ Weeks of his/her Internship and has _____ cumulative hours to date.

(Note: Student has maintained a record of cumulative hours to date.)

Rater's Signature _____ Date _____

Student's Signature _____ Date _____

Advisor's Signature _____ Date _____