**FORM G**

Internship Program

FACULTY SPONSOR’S FINAL EVALUATION

Name of Student \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. What were the strong and weak points of this student’s total program?

 Strong Points:

 Weak Points:

2. Would you recommend a similar experience for other students? Why or why not?

3. Are we justified in giving University credit for such an experience? Why or why not?

4. Suggestions for improvement and other comments.

5. Circle the number that best gives an over-all evaluation of this internship

Outstanding\_\_\_\_\_\_Excellent\_\_\_\_\_\_Good\_\_\_\_\_\_Fair\_\_\_\_\_\_Poor

 10 9 8 7 6 5 4 3 2 1

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (Instructor Signature and Date)