

BIOLOGY INTERNSHIP PROGRAM - UNIVERSITY OF RICHMOND
Student Intern Evaluation

Name of Intern _____ Date: _____

Sponsor _____ Title/Agency _____

Please evaluate your intern on the items listed below:

| | Superior | Very Good | Average | Below Average |
|--|----------|-----------|---------|---------------|
| Performance on specific assignments | | | | |
| Journal | | | | |
| Motivation | | | | |
| Initiative | | | | |
| Reliability | | | | |
| Flexibility | | | | |
| Willingness to learn | | | | |
| Responsiveness to constructive criticism | | | | |
| Interpersonal relations | | | | |
| Communication Skills | | | | |
| Attendance | | | | |
| Overall Rating | | | | |

Other Comments:

 Signature of sponsoring supervisor

Please mail to: Internship Advisor, Department of Biology, University of Richmond VA 23173.
 Telephone: (804) 289-8871, Fax (804) 289-8233.

Your time and effort in evaluating this intern is very much appreciated.