

**FACULTY REPORT
INTERNSHIP SUMMARY**

STUDENT _____

FACULTY ADVISOR _____

SEMESTER _____ DEPARTMENT _____

EMPLOYER _____

LOCATION _____

SUPERVISOR _____ DATE OF CONTACT _____

Initial Contact _____ Follow Up _____ Method of Contact _____ Telephone _____

SUMMARY OF STUDENT'S EXPERIENCE:

CONCERNS TO BE ADDRESSED BY CAREER PLANNING AND DEVELOPMENT:

Faculty Advisor

Date

FACULTY EVALUATION OF PLACEMENT

STUDENT _____ SEMESTER _____ YEAR _____

DEPARTMENT _____ FACULTY ADVISOR _____

EMPLOYER _____

DATE OF CONTACT _____ SITE VISIT: Yes _____ No _____

COMMENTS:

Please rate the above placement using the following scale:

5=Excellent 4=Good 3=Fair 2=Poor 1=Unsuitable

Circle only one. Please feel free to make comments as they are valuable in assessing the organization for placements.

1. This internship is appropriate for students in my department. 5 4 3 2 1

Comments _____

2. The position duties were clearly defined and matched the courses objectives. 5 4 3 2 1

Comments _____

3. The student was encouraged to accept responsibilities. 5 4 3 2 1

Comments _____

4. The work supervision was adequate. 5 4 3 2 1

Comments _____

5. This internship offers challenging, meaningful work. 5 4 3 2 1

Comments _____

To be well prepared to do this internship, what courses should students take? _____

This internship should continue to be made available to our students. Yes _____ No _____

To your knowledge, are there any other positions available in this organization? Yes _____ No _____

Contact Person _____ Phone _____

Suggestions for improving the internship process for students _____