

**FLORIDA GULF COAST UNIVERSITY
DIVISION OF RESORT & HOSPITALITY MANAGEMENT
INTERNSHIP EVALUATION FORM**

Name of Student: _____ Date: _____

Employer's Supervisor: _____

Position or Title: _____

Agency: _____

Period Covered by Rating: From: _____ To: _____

I _____ (Supervisor) acknowledge that _____ (Student)

has worked _____ hours for _____ organization / business.

This evaluation should be made with care and fairness for the interest of the student. Reflect carefully upon the student's strengths and weaknesses. Be as accurate and objective as possible in your appraisal. The evaluation should be based upon the total internship experience and not upon isolated incidents alone. The evaluation form should be shared with the student through an evaluation conference with the Employer's supervisor.

The following categories should serve as a guide in completing the internship evaluation report:

5	=	Superior
4	=	Good
3	=	Satisfactory
2	=	Needs Improvement
1	=	Unacceptable
0	=	Do not know

Rating of 4 or 5 should be given only to students demonstrating above average professional competencies.

I. PROFESSIONAL PERFORMANCE

_____	Established work goals
_____	Success in achieving goals
_____	Displays ability to organize people and resources
_____	Completes assignments on or before due date
_____	Is critical of own performance and quality of work
_____	Displays ability to lead and direct

_____ Ability to orally communicate ideas
_____ Strives for quality in written expression
_____ Is able to gain and hold respect and confidence of
_____ associates
_____ Is able to recognize a problem and proceed on own
_____ initiative
_____ Delegates responsibility effectively
_____ Produces effective solutions to disciplinary problems

Other noted performance traits: _____

Recommended Grade on Professional Performance: _____

II. PROFESSIONAL KNOWLEDGE

_____ Displays basic knowledge and understanding of
_____ Employer's services
_____ Has displayed growth in knowledge and understanding
_____ Ability to apply knowledge in a practical way
_____ Ability to think independently
_____ Understands/is sensitive to group needs

Other noted performance traits: _____

Recommended Grade on Professional Performance: _____

III. PROFESSIONAL PERSONALITY

_____ Is enthusiastic
_____ Is cheerful and friendly
_____ Exhibits pleasant, tasteful personal appearance
_____ Is courteous and tactful
_____ Employs good voice and speech presentation, tone and
_____ inflection
_____ Displays mature judgment
_____ Displays sense of humor
_____ Is consistent but fair in personal relationships
_____ Displays concern for others
_____ Is able to adjust to situations
_____ Displays diplomacy in relationships with colleagues
_____ Displays evenness of disposition and absence of tension
_____ symptoms
_____ At ease with people of different ages and status

Other noted performance traits: _____

Recommended Grade on Professional Performance: _____

IV. PROFESSIONAL ATTITUDE

- _____ Displays initiative and imagination
- _____ Displays zeal for the profession
- _____ Actively seeks and is alert to potential learning situations
- _____ Attends meetings
- _____ Understands, follows and upholds Employer's rules and regulations
- _____ Accepts suggestions and criticisms willingly

Other noted performance traits: _____

Recommended Grade on Professional Performance: _____

V. SUPERVISOR COMMENTS

- A. Please make any additional comments, recommendations, etc., you may have concerning the student being evaluated.

- B. Based on your evaluation of the student's performance, please indicate your recommended grade for the internship experience.

___A ___A- ___B+ ___B ___B- ___C+ ___C ___C- ___D+ ___D ___F

VI. STUDENT COMMENTS

- A. Please make any comments concerning your evaluation of your performance.

VII. SIGNATURES

I have reviewed my evaluation as completed by my agency supervisor.

Student: _____

I have reviewed my evaluation with the student through a personal conference.

Employee's Supervisor: _____