



Please evaluate the intern on your above stated objectives:

STUDENT PERFORMANCE LEVEL	A	B	C	D	E
<b>Cooperation</b> —Working with and relating to associates and supervisors					
<b>Judgment</b> —Ability to evaluate situations and make decisions					
<b>Initiative</b> —General resourcefulness and imagination					
<b>Dependability</b> —Attendance, punctuality, productivity					
<b>Knowledge of job</b> —Understanding of his/her duties					
<b>Reaction to criticism</b> —Student’s ability to react to and learn from criticism					
<b>Growth</b> —General growth and progress					
<b>Overall rating</b>					

Would you be interested in having students from UIC placed in your organization next semester? \_\_\_\_\_ Yes \_\_\_\_\_ No  
(If no, please explain below)

ADDITIONAL COMMENTS:

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Supervisor’s signature \_\_\_\_\_ Date \_\_\_\_\_

Student’s signature \_\_\_\_\_ Date \_\_\_\_\_

**NOTE:** Students should return the completed form to their Faculty Internship Advisor