

**STUDENT EVALUATION OF INTERNSHIP**

Student's Name: \_\_\_\_\_ Major: \_\_\_\_\_ Date: \_\_\_\_\_  
 Company Name: \_\_\_\_\_ Supervisor: \_\_\_\_\_

1. Would you recommend this employer to new internship applicants? Why?
2. How would you rate the overall experience?  
 Excellent     Above Average     Average     Below Average     Poor
3. What tasks did you perform/learn?
4. Were you given adequate training and/or direction to familiarize you with your job responsibilities?
5. Do you feel the assignments given you were:  
 Realistic and attainable?     Too Challenging?     Not Challenging Enough?
6. Did your supervisor/co-workers provide regular feedback on your performance/progress?
7. In what ways do you feel you benefited from working with your employer?
8. How well did your Pellissippi State coursework prepare you for your internship?

Exceptionally Well Prepared (5)	Well Prepared (4)	Adequately Prepared (3)	Somewhat Prepared (2)	Not At All Prepared (1)	Not Applicable(0) (Explain)

9. Was the Internship Coordinator helpful before and during the semester?
10. In your opinion, in what ways could the internship experience be improved?
11. Will employment continue with this employer following the completion of your internship? \_\_\_\_\_
12. Paid [ ]    Unpaid [ ]    If paid, starting salary? \_\_\_\_\_

**NOTE:** This form also available electronically on my webpage at [www.pstcc.edu/departments/bctpi/documents.html](http://www.pstcc.edu/departments/bctpi/documents.html)

***Please complete and return to BCT Internship Coordinator, MC251 or FAX 694-6426***