

## EVALUATIONS

The student intern and the supervisor will both complete mid-term and final evaluations. The mid-term evaluation will consist of open-ended questions on how the internship is progressing so far from both the student's and department's perspective. This evaluation will be done via email and Human Resources will send a message directly to the student as well as the department. The evaluation will consist of three questions:

- 1) What aspects of the internship are you the most satisfied with? (student & supervisor)
- 2) What recommendations would you make to improve the internship? (student & supervisor)
- 3) Are you experiencing any problems or concerns that you would like to discuss with the Internship Program Manager or Coordinator?

A final evaluation will also be conducted by both the student and department and will be sent the week of August 12<sup>th</sup> for completion at the end of the internship. Samples are below for both the intern and department supervisor. This evaluation will either be conducted via email or Survey Monkey and Human Resources will send a message directly to the student and department supervisor for this evaluation.

Please remember that you should keep your intern continually informed (weekly, bi-weekly) on how well they are performing and what is expected of them. Let your intern know when work is done well and give the opportunity to improve/correct problems before the end of the assignment.

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## Henrico County Internship Student Evaluation

School: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Major: \_\_\_\_\_

Evaluation Period:  Fall       Spring       Summer

Year: \_\_\_\_\_

Experience was: *(Check all that apply and indicate the number of credit hours received)*

For Pay      \_\_\_\_\_ # of Hours      no credit hours

Directions: Objectively evaluate your experience using the rating scale shown below.

5 = Outstanding

3 = Acceptable (indicate reason)

1 = Unacceptable

4 = More than Acceptable

2 = Needs Improvement

N/A = Not applicable

WORK EXPERIENCE	RATING	COMMENTS, EXAMPLES
Relationship of Work to Career Goals		
Training Received		
Supervision Received		
Level of Responsibility Assigned		
Abilities Utilized		
LEARNING EXPERIENCE		
Learned Information, Skills, or Techniques Not Learned in Class		
Gained Career / Professional Knowledge		



Relationship of Academic Assignments to Work		
<b>PERSONAL DEVELOPMENT</b>		
Gained Greater Self-Confidence		
Improved Understanding of Strengths, Weaknesses		
Met People who Contributed to Professional Growth		
<b>OVERALL PERFORMANCE RATING</b>		

What do you consider the best aspects of your internship experience?

What recommendations would you make to improve your internship?

Would you be interested in a future internship opportunity with Henrico County? \_\_\_ Yes \_\_\_ No  
 \_\_\_yes \_\_\_no

Student's Signature

Date:

**Please make copies for your records and return completed form to lum@henrico.us**

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## Henrico County Supervisor's Internship Evaluation

*To be completed by the supervisor and discussed with the intern.*

Student: \_\_\_\_\_ Organization: \_\_\_\_\_

Major: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Total number of hours worked during this evaluation period: \_\_\_\_\_

Experience was: *(Check all that apply)*

For Academic Credit  
(indicate hours)

Pay

Time Period: \_\_\_\_\_

Directions: Objectively evaluate this student's performance using the scale shown below:

5 = Outstanding

3 = Acceptable (indicate reason)

1 = Unacceptable

4 = More than Acceptable

2 = Needs Improvement

N/A = Not applicable

PERFORMANCE ITEM	RATING	COMMENTS, EXAMPLES
Communication		
Personal Accountability		
Functional Expertise		
Leading and Influencing		
Managing and Transferring Knowledge		
Results Driven		
Serving Customers		
Technological Literacy		
Understanding the Business of Henrico County		

OVERALL PERFORMANCE RATING		
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Please comment on the intern's strengths as well as how she/he may improve performance:

Would you be interested in having interns work with you in the future?  Yes  No

Supervisor's  
Signature

\_\_\_\_\_

Date

\_\_\_\_\_

**Please make copies for your records as needed and return completed form to lum@henrico.us**

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