

## Intern Assessment Form

Intern's Name: \_\_\_\_\_

Department: \_\_\_\_\_

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

Month: \_\_\_\_\_

\* Please rate the following aspects of your intern on the basis of this scale:

(1) Unsatisfactory, (2) Uncomplimentary, (3) Fair, (4) Commendable, (5) Exceptional

Characteristic Characteristics	Score
Attendance and Punctuality	☆ ☆ ☆ ☆ ☆
Behavior towards learning objectives	☆ ☆ ☆ ☆ ☆
Professional & Career Development Skills	☆ ☆ ☆ ☆ ☆
Interpersonal & Teamwork Skills	☆ ☆ ☆ ☆ ☆
Improvement in Learning	☆ ☆ ☆ ☆ ☆

Comments for Intern \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Over All Performance

Outstanding  Above Average  Satisfactory  Below Average  Unsatisfactory

Signatures/Stamp of HoD