Department of Arts Administration, Education and Policy Internship Description

Student Name:	OSU ID #:		
Program:	Advisor:		
Internship Site:			
Address:			
Internship Supervisor's Name & Title:			
Supervisor's Telephone Number:	Supervisor's Email Address:		
Length of Internship:	Hours per Week/Semester:		
Please describe the intern's duties in detail	(administrative, research, development, clerical, etc.):		
Signature, Student	Date		
Signature, Internship Supervisor	Date		
Signature, Academic Advisor	Date		

Department of Arts Administration, Education and Policy Internship Evaluation Form

Student Name:	Date:
OSU ID #:	
Internship Site:	
Supervisor's Name & Position:	
Give a brief description of the student's duties and responsibilities:	

Instructions: Please use these guidelines to rank the following:

E = EXCELLENT (4 points): Always performed above the level of a skill expected by supervisor

V = VERY GOOD (3 points): Occasionally performed above level of skill expected by supervisor

G = GOOD (2 points): Performed at level of skill expected by supervisor

F = FAIR (1 point): Frequently performed at level of skill expected by supervisor

U = UNSATISFACTORY (0 points): Rarely performed at level of skill expected by supervisor

Performance Duties (check one for each)		E	V	G	F	U
1.	Ability to follow instruction of supervisor					
2.	Willingness to ask questions if unsure of procedure					
3.	Ability to maintain work schedule					
4.	Completes tasks by deadline					
5.	Ability to work independently					
6.	Ability to take initiative					
Resour	ces and Skills (check one for each)	E	V	G	F	U
1.	Ability to organize project materials					
2.	Ability to plan tasks					
3.	Ability to accomplish tasks					
4.	Ability to undertake unfamiliar activities willingly					
5.	Ability to solve problems with a variety of methods					
6.	Ability to express ideas and concerns verbally					
7.	Ability to express ideas and concerns in writing					
Interaction with Colleagues (check one for each)		E	V	G	F	U
1.	Ability to get along with colleagues					
2.	Ability to accept criticism					
3.	Ability to work as a team member					

Please use this space for additional comments:							
My internship supervisor has discussed this evaluation with me.							
Signature, Student	Date						
Signature, Supervisor	Date						
Supervisor's Telephone Number	Supervisor's Email Address						