

Department of Public Administration
Site Supervisor Internship Final Evaluation Form

Intern Name: _____ Date: _____

Please rate your intern using the following scale:

- 4 The student demonstrates this ability on his or her own
- 3 The student demonstrates this ability with little direction
- 2 The student has some ability in this area, but requires some supervision
- 1 The student does not demonstrate this ability
- N/A Does not apply

Attribute or Skill	4	3	2	1	N/A
Dependable/Timeliness of work/Meeting deadlines					
Ability to work with others					
Ability to work independently					
Professional attitude					
Decision-making skills					
Problem-solving skills					
Communication skills					
Organization skills					
Quality of work					
Time management					

Certification of Work Hours Completed: ___ 300 ___ 150 ___ Other (please clarify)

Additional Comments:

Intern's strengths:

Areas that need development:

Submitted By: Supervisor Signature: _____

Organization: _____

Please return directly to:

Student Intern or
 Gina Amatangelo, Internship Coordinator
 Gina.Amatangelo@utsa.edu