Student's Assessment of Internship Employer - SAMPLE

The assessment of employer is the student's final report of their internship employer site.

Congratulations on completing an internship this semester! Part of your grade is comprised of completing both an evaluation and some short answer questions. Please complete and submit this form by the date specified on Cabrini Learn.

Hi,	Rachael. When you submit this form, the owner will see your name and email address.		
1. First Name □ □			
	Enter your answer		
2.	Student Middle Initial		
	Enter your answer		
3.	Student Last Name		
	Enter your answer		

4. Cabrini Email Address

Enter your answer

5. Your Major at Cabrini		
Enter your answer		
6. Your Employer Name		
Enter your answer		
7. Your Work Supervisor's First Name		
Enter your answer		
8. Your Work Supervisor's Last Name		
Enter your answer		
9. Hourly rate if applicable (\$/hour)		
Enter your answer		
10. Was an internship orientation provided by your employer?		
No orientation was provided		
Yes, it was somewhat related to the work that I did		
Yes, it was complete and accurate		

11. Was on-site training provided?

	\bigcirc	Yes
	\bigcirc	Some
	\bigcirc	No
12.		re you provided a Handbook/Website that reviewed company icies/procedures?
	\bigcirc	Yes
	\bigcirc	No
	\bigcirc	Maybe
13.		as provided with real work assignments (i.e. developed major related skills, portunities to learn etc)
	\bigcirc	Strongly Agree
	\bigcirc	Agree
	\bigcirc	Neutral
	\bigcirc	Disagree
	\bigcirc	Strongly disagree
14	. Tea	m involvement was encouraged at my internship?
	\bigcirc	Strongly Agree
	\bigcirc	Agree
	\bigcirc	Neutral
	\bigcirc	Disagree
	\bigcirc	Strongly disagree

15. Did the position live up to the initial job description?
No, there was no relationship between the job description and what I actually did
No, very little of the description matched what I did
Yes, it mostly matched the job description
Yes, it closely matched the job description.
16. Were you offered flex-time/ability to work flexible hours and/or remotely?
Yes
○ No
○ Sometimes
17. Were you able to shadow other departments?
○ Yes
○ No
○ n/a
18. Did you have the opportunity to meet or speak with administrative/executive employees?
○ Yes
○ No
O n/a
19. Was your work showcased through presentations/expos?
○ Yes

○ No
O n/a
20. Use this space for any additional notes on the above questions?
Enter your answer
21. Please comment on both positive and negative aspects of your placement; consider your supervisor's manager style, balancing school and work, the types of projects and tasks you were assigned, etc.
Enter your answer
22. Would you recommend this internship to another student? Please explain why or why not.
Enter your answer
23. Were you offered a permanent position with this employer? Please explain.
Enter your answer

24. Please provide any additional comments about your experience.

Enter your answer
Ve know that your internship may have been impacted by COVID-19. Please indicate below how this impacted your internship experience. (For example, Was our internship cut short? Are you completing the internship remotely?)
Enter your answer

25.

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