Grove City College
Classical Christian School Intern Performance Evaluation Form

We appreciate your supervision of the Grove City College student who performed his/her internship with your school. In order for us to properly evaluate and grade this student’s effort, we ask that you take a few minutes to complete this performance evaluation.

We encourage you to review this evaluation with the student before he/she leaves your school. We routinely provide a copy of the evaluation to students if they ask for it. Once completed, please mail this original form DIRECTLY to the faculty member listed below. This faculty member is responsible for grading the internship experience. Thank you.

Sarah Potter_________________________________________________
Faculty Name

Grove City College 100 Campus Dr. Box 2815 Grove City, PA 16127
Address

This evaluation contains the following four sections:

1. Validate the total hours worked – Students earn credits based on the number of hours worked.

2. Evaluation of general skills - Please rate the intern by each of the skills listed. Circle the number that represents the performance measure you believe the intern achieved.

3. Evaluation of specific job tasks and responsibilities - Interns are generally assigned specific tasks and responsibilities. Please identify some of the tasks that the intern performed and circle the number that represents the performance measure you believe the intern achieved.

4. Evaluation of strengths and weaknesses - As in any learning experience, a student needs feedback on his/her strengths and weaknesses. Please note most notable strengths exhibited during the internship and any weaknesses where improvement is needed.

5. Overall evaluation - What is your overall assessment of the intern’s performance? You may also assign a recommended letter grade for this intern. The faculty sponsor is ultimately responsible for the student’s final grade; however, it is helpful to use your grade evaluation in this process.

If the faculty member’s name and address is blank, please mail this document to:
Fred J. Lang, GCCI Coordinator
Grove City College
100 Campus Drive
Grove City, PA 16127-2104
Performance Evaluation Form

Name of Intern:

___________________________  _______________________________________
Last                   First                   MI

Name of host organization:

_____________________________________________________________________
Begin/End Work Period: _____________________________________________

Hours Worked per Week: _____40______ Total Hours Worked: _____80_______

Evaluator’s name:

_____________________________________________________________________
(Please print)

Evaluation of General Job Skills

1. Communication (Oral & written):

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<td>Unsatisfactory</td>
<td>Poor</td>
<td>Fair</td>
<td>Average</td>
<td>Good</td>
<td>Very Good</td>
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2. Following instructions

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3. Interactions with fellow employees

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4. Appearance

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5. Courtesy

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6. Attention to detail

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7. **Promptness and timeliness**

1 2 3 4 5 6 7
Unsat. Poor Fair Average Good Very Good Excellent

8. **Decision making**

1 2 3 4 5 6 7
Unsat. Poor Fair Average Good Very Good Excellent

9. **Initiative**

1 2 3 4 5 6 7
Unsat. Poor Fair Average Good Very Good Excellent

10. **Creativity**

1 2 3 4 5 6 7
Unsat. Poor Fair Average Good Very Good Excellent

11. **Attitude**

1 2 3 4 5 6 7
Unsat. Poor Fair Average Good Very Good Excellent

**Evaluation of Specific Job Tasks and Responsibilities**

Task 1: Please describe ________________________________

1 2 3 4 5 6 7
Unsat. Poor Fair Average Good Very Good Excellent

Task 2: Please describe ________________________________

1 2 3 4 5 6 7
Unsat. Poor Fair Average Good Very Good Excellent

Task 3: Please describe ________________________________

1 2 3 4 5 6 7
Unsat. Poor Fair Average Good Very Good Excellent

Task 4: Please describe ________________________________

1 2 3 4 5 6 7
Unsat. Poor Fair Average Good Very Good Excellent
Evaluation of Strengths and Weaknesses

Identify strengths that the intern exhibited during the internship:

1.

2.

3.

Identify weaknesses where improvement is needed:

1.

2.

3.
Overall Evaluation and Comments

Please review your evaluation of this intern's general skills, specific job tasks and responsibilities, and strengths and weaknesses exhibited. What is your overall assessment of this intern's performance?

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If you were to assign a final grade to this internship, what it would be?

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<th>B</th>
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<tr>
<td>Unsat.</td>
<td>Below Average</td>
<td>Average</td>
<td>Above Average</td>
<td>Exceptional</td>
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Comments:
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Have you reviewed this assessment with the intern?

Yes _____ No _____

If no, may the intern's faculty sponsor review this assessment with the intern?

Yes _____ No _____

Evaluator's signature ________________________________ Date ___________________________

- Thank You -