

Internship Exit Survey | WGSST 3191

Department of Women's, Gender and Sexuality Studies
The Ohio State University

To be completed by the student intern.

Name: _____

Date: _____

Semester: _____

Internship Site: _____

Supervisor Name: _____

Please indicate the appropriate selection.

Site

Internship environment was safe.

Resources were available to accomplish tasks.

Co-workers were accepting and helpful.

Supervisor

Supervisor provided a clear description of my duties.

Feedback was provided on my progress.

Effort was made to make it a learning experience for me.

Supervisor was supportive of the agreed-upon work days/hours.

Learning Experience

Internship experience related to the WGSS learning goals.

Provided opportunities met my expectations.

I learned, accomplished, and completed what I hoped to.

Please list 3 specific things you learned during your internship and how they fit into your life and/or career goals. You may attach an additional document if needed.

Comments?

Please complete and return to Lauren Rose Strand via email (strand.12@osu.edu) or in person at 286 University Hall by your established and agreed upon deadline.