

Internship Exit Survey | WGSST 3191

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

To be completed by the internship supervisor.

Name of student being evaluated: _____

Date: _____

Please indicate the appropriate response from the drop-down feature.

Internship Organization

The student:

Sought to understand the organization's mission and goals.

Supported the organization's mission and goals.

Fulfilled the organization's expectations.

Reported to the internship site as scheduled and on-time.

Exhibited a positive and constructive attitude.

Integrity

The student:

Behaved in an appropriate manner.

Respected the diversity of co-workers

Valued the internship site and co-workers.

Learning Experience

The student:

Asked pertinent and purposeful questions.

Sought out appropriate resources.

Accepted responsibility of mistakes and learned from experiences.

Overall Performance

Overall rating of student intern's performance

Comments?

Evaluator's Name

Evaluator's Signature

Date

Note to student intern: Please return this form to Lauren Rose Strand via email (strand.12@osu.edu) or in-person to 286 University Hall, or have your supervisor submit the form via email by the established and agreed upon deadline.