

ROSEMONT COLLEGE

INTERNSHIP PROGRAM

EMPLOYER'S EVALUATION

Name of Employer Supervisor: _____

Employer: _____

Name of Student: _____

Semester of Experiential Education: _____ Year: _____

This questionnaire will help us to evaluate the success of the student's Experiential Education term with your organization as well as evaluate the effectiveness of this program for your professional and organizational needs. You, as the employer supervisor, are a valuable source of ideas to improve the program and accurately assess this student's performance. We appreciate your candid response to these questions and encourage you to discuss this evaluation with the student. Please return this form to: Coordinator of Experiential Learning, Rosemont College 1400 Montgomery Avenue, 108 Science Building, Rosemont, PA 19010

1. How did you hear about Rosemont College's Internship Program?

- Website
 Prior Relationship
 Mailing/Brochure
 Other, please specify _____

2. Why did you choose to participate in the program?

- to recruit trained entry-level employees
 To participate in the educational process
 To meet a need for temporary staff
 To free permanent staff for other duties
 To save money
 Other, please specify _____

3. Were the results what you expected?

- Yes
 No (please explain) _____

4. Did you find the staff at Rosemont College to be helpful during this experience?

- Yes
 No (please explain) _____

5. How often did the Coordinator of Experiential Learning visit you? _____

6. Were these visits helpful?

- Yes (how) _____
 No (please explain) _____

7. How would you rate your experience with the Internship program on these points?
- | | Good | Average | Poor |
|--|-------------|----------------|-------------|
| a. Utilizing your background and training as a supervisor | _____ | _____ | _____ |
| b. Value to your organization | _____ | _____ | _____ |
| c. Value to you as a professional in the field | _____ | _____ | _____ |
| d. Allowing you to participate in the formal education process | _____ | _____ | _____ |
8. How did you feel about the importance of your efforts as far as contributing to the student's overall personal growth and professional development?
- _____ Necessary and important
 _____ Unnecessary and unimportant

9. How would you rate your individual internship student on these points?
- | | Good | Average | Poor |
|---|-------------|----------------|-------------|
| a. Requesting the proper amount of direction and guidance | _____ | _____ | _____ |
| b. Seeking you out when he/she had a problem | _____ | _____ | _____ |
| c. Demonstrating concern about the job as a professional in the field | _____ | _____ | _____ |
| d. Asking for your ideas and suggestions | _____ | _____ | _____ |
| e. Discussing his/her performance with you | _____ | _____ | _____ |
| f. Attitude – Application to work | _____ | _____ | _____ |
| g. Ability/Willingness to learn | _____ | _____ | _____ |
| h. Dependability | _____ | _____ | _____ |
| i. Initiative | _____ | _____ | _____ |
| j. Quality of Work | _____ | _____ | _____ |
| k. Relations with others | _____ | _____ | _____ |
| l. Maturity/Confidence | _____ | _____ | _____ |
| m. Quantity of Work | _____ | _____ | _____ |
| n. Judgment Skills | _____ | _____ | _____ |
| o. Attendance | _____ | _____ | _____ |
| p. Punctuality | _____ | _____ | _____ |
| q. Lab Skills | _____ | _____ | _____ |

10. In what way do you think the internship program affected the student's career goals?
- _____ No Change
 _____ Became more certain of career choice
 _____ Became less certain of career choice
- _____ Other, _____

11. Was the student offered a job upon completion of the internship?
- _____ Yes, they were offered a position.
 _____ Did he/she accept? _____ Yes _____ No
 If no, reason why:
- _____ No, they were not offered a job.

Thank you for taking the time to fill out this form. Please feel free to include additional comments on a separate sheet.

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