MSJC MT. SAN JACINTO COLLEGE

OCCUPATIONAL INTERNSHIP PROGRAM
EMPLOYER'S EVALUATION OF STUDENT

*To be filled out by site supervisor and discussed with student—signatures required

Student/Interns Name: _____

Company: _____ **Supervisor Name/Title:** _____

This is an evaluation of the student as a worker in the company and as a student in the Cooperative Work Experience Program. Your evaluation will help the college instructor assess the student's overall class performance.

PROGRESS TOWARD OBJECTIVES:

Objective #1: _____ ☐ Achieved Objective ☐ Limited Progress

Objective #2: _____ ☐ Achieved Objective ☐ Limited Progress

Objective #3: _____ ☐ Achieved Objective ☐ Limited Progress

DISCUSSION OF ACHIEVEMENT TOWARDS OBJECTIVES:

_____

_____

_____

OVERALL WORK PERFORMANCE:

	Excellent	Above Average	Satisfactory	Needs Improvement
ATTENDANCE Attends as scheduled.	☐	☐	☐	☐
PUNCTUALITY & DEPENDABILITY Meets deadlines and is prompt.	☐	☐	☐	☐
REALTIONS WITH OTHERS Is cooperative, courteous, and friendly to customers, associates and supervisors. Accepts suggestions and controls his/her emotions.	☐	☐	☐	☐
ATTITUDE Is eager to improve. Progresses on won initiative; dependable, enthusiastic, sincere, has appropriate work habits. Uses good judgment.	☐	☐	☐	☐
ABILITY TO LEARN Learns quickly and is eager to new ways of completing tasks. Is open to changes and handles new tasks/challenges with ease.	☐	☐	☐	☐
QUALITY OF WORK Strives for improvement; shows thoroughness, accuracy, and precision in detail. Has satisfactory performance and speed.	☐	☐	☐	☐
COMMUNICATION Adheres to professional verbal and non-verbal communication at all times. Demonstrates sensitivity to culture and diversity.	☐	☐	☐	☐

COMMENTS:

_____

_____

_____

_____   _____
Supervisor Signature   **Date**

_____   _____
Student Signature   **Date**

TOTAL NUMBER OF HOURS STUDENT WORKED AT SITE: _____