



Michael L Shuman, Ph.D.

This form must be <u>completed by the internship sponsor</u> at the end of the internship semester

organization official completing this review. This field represents a non-verified signature and the USF faculty supervisor will verify the content of this review by phone or email.

| Date of Evaluation: Intern: Sponsor Organization: On-Site Supervisor: |                        | Evaluati | on Score Key | Internship Coordinator Department of English 4202 E Fowler Ave CPR 107 Tampa FL 33620-5550 Phone: 813-974-5763 Fax: 813-974-2270 http://english.usf.edu/internships/ |
|---|------------------------|----------|--------------|--|
| 1 = Un  | satisfactory; 2 = Need |          |              | 4 = Above Average; 5 = Outstanding   |
| Criteria  |                        | Score    |              | Comments   |
| Quality of Work   |                        |          |              |  |
| Dependability / Meets Deadlines                                       |                        |          |              |  |
| Organizational Skills   |                        |          |              |  |
| Leadership Ability  |                        |          |              |  |
| Interpersonal Relations /   | Teamwork               |          |              |  |
| Communication Skills  |                        |          |              |  |
| Ability to Apply Classroom Experience                                 |                        |          |              |  |
| Overall Comments:   |                        |          |              |  |
| Specific Strengths / Are  | as for Improvement:    |          | What Do Y    | ou Think the Student Gained from the Internship?   |
| Please type the name of the sponsor                                   |                        |          |              |  |