

**Internship Evaluation Form**  
**University of Wisconsin-Eau Claire**  
**ENPH 435/735**

Student's Name

Agency Offering the Internship

Has the student been cooperative?

Was the student willing to take and complete work assignments?

1. Did the student have sufficient background to satisfactorily take this internship?
2. Did the student present a neat appearance?
3. Was the student polite and courteous in his/her working environment?
4. Brief summary of your evaluation of the student. (Point out both strengths and weaknesses—if necessary use a supplemental page.)

5. What grade would you suggest the student receive for the internship?  
A, A-, B+, B, B-, C+, C, C-, D+, D, D-, F

\_\_\_\_\_  
Supervisor's Signature

\_\_\_\_\_  
Date

**PLEASE RETURN THE COMPLETED FORM TO OUR OFFICE BY  
AT THE LATEST.**

Department of Public Health Professions  
Human Sciences and Services building, Room 205  
University of Wisconsin-Eau Claire  
Eau Claire, WI 54702-4004

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"The information requested will not be used for purposes other than for which it is collected."