

# **NBBS Internship Evaluation Form**

For the Month of:

(Revised 9/24/24)

**Student: Print Your Name** \_\_\_\_\_ **Due Date: 2<sup>nd</sup> Friday** \_\_\_\_\_

**Student:** Please fill in the dates in # 1 and give to your Supervisor/Evaluator at the close of the month.

1.

	Week 1	Week 2	Week 3	Week 4	Week 5
<b>Dates you served</b>					

**Supervisor/Evaluator:** Please fill in Areas 2 & 3, sign and return to the Dean's Office by the 2<sup>nd</sup> Friday of each month, for Internship served the prior month. Do not return to the student. Please mark "LATE" in the "Notes" section below if this form was not submitted to you in a timely manner.

2. Score each category for the above-named student with a letter as follows:

A. Excellent B. Good C. Fair D. Poor E. Unknown D. Not Relevant

	Week 1	Week 2	Week 3	Week 4	Week 5
<b>Appearance</b>					
<b>Punctuality</b>					
<b>Attendance</b>					
<b>Commitment to their Duties</b>					
<b>Response to Authority</b>					
<b>Leadership Capabilities</b>					

3. **Supervisor/Evaluator:** Any Notes you would like to add? Recommendations? Acknowledgments?

**Supervisor/Evaluator's Printed Name:** \_\_\_\_\_

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**\*Supervisor/Evaluator - Return to NBBS Dean's Office (Do not return this form to the student)\***