



INTERNSHIP EVALUATION FORM

Intern's Name

Principal's Name

Semester/Year

Program

Instructor

Field Experience Level: Internship

Please mark the rating that best reflects your evaluation of the intern student in each of the five items.

Attendance

☐ outstanding ☐ satisfactory ☐ unsatisfactory

Met Expectations

☐ outstanding ☐ satisfactory ☐ unsatisfactory

Fulfilled Program Requirements

☐ outstanding ☐ satisfactory ☐ unsatisfactory

Overall Performance

☐ outstanding ☐ satisfactory ☐ unsatisfactory ☐ incomplete

Professional Potential as An Educational Leader

☐ outstanding ☐ satisfactory ☐ unsatisfactory ☐ counseling suggested

Please mark only items in this section which are judged to be Outstanding (+) or which Need Attention (-).

<input type="checkbox"/> Acts with Integrity	<input type="checkbox"/> Collaboration with Stakeholders
<input type="checkbox"/> Appearance/Dress	<input type="checkbox"/> Responds to Community Interests/Needs
<input type="checkbox"/> Applies Best Practices for Student Learning	<input type="checkbox"/> Content Knowledge
<input type="checkbox"/> Personality	<input type="checkbox"/> Oral Communication Skills
<input type="checkbox"/> Enthusiasm	<input type="checkbox"/> Written Communication Skills
<input type="checkbox"/> Cooperative Attitude	<input type="checkbox"/> Presentation Skills
<input type="checkbox"/> Innovative Use of Time and Resources	<input type="checkbox"/> Evaluation Skills
<input type="checkbox"/> Initiative	<input type="checkbox"/> Management Skills
<input type="checkbox"/> Dependability	<input type="checkbox"/> Creates/Articulates a Vision of Higher Standards
<input type="checkbox"/> Acts Fairly	<input type="checkbox"/> Acts Ethically
<input type="checkbox"/> Accepts Constructive Criticism	<input type="checkbox"/> Understands the Larger Educational Context

