Scripps Howard School of Journalism & Communications
Student Internship Evaluation Form

Student______________________________________ ID#__________________________

Period of Internship__________________________ Hours Worked______________

Company/Organization:___________________________________________________

Supervisor’s Name and Title____________________________________________

Please attach a description of the internship duties and responsibilities.

Please evaluate the internship experience on the following using the scale from 1
(strongly disagree) to 5 (strongly agree) or NA (not applicable to the work
environment or internship) for each of the items below. Please include comments
whenever possible. They are helpful.

1. Your internship met your expectations. 1 2 3 4 5 NA
   Comments:___________________________________________________________
   _________________________________________________________________

2. You were able to produce work samples for a portfolio submission. If so, please explain. If not, please explain. 1 2 3 4 5 NA
   Comments:________________________________________________________
   _________________________________________________________________

3. The work you did was challenging and substantive. 1 2 3 4 5 NA
   Comments:________________________________________________________
   _________________________________________________________________

4. You were able to assume additional responsibility as your experience increased. 1 2 3 4 5 NA
   Comments:________________________________________________________
   _________________________________________________________________

5. You were satisfied with the amount of training you received. 1 2 3 4 5 NA
   Comments:________________________________________________________
   _________________________________________________________________

6. Your supervisor took an active interest in your learning goals and your success on the job. 1 2 3 4 5 NA
7. There was enough work assigned to keep you busy. 1 2 3 4 5 NA

Comments: __________________________________________________________

8. There was adequate supervision and direction for your work. 1 2 3 4 5 NA

Comments: __________________________________________________________

9. Adequate explanation was given to you concerning what was expected of you as an intern and the nature of tasks assigned. 1 2 3 4 5 NA

Comments: __________________________________________________________

10. You are better prepared to enter the work world after this internship. 1 2 3 4 5 NA

Comments: __________________________________________________________

11. You were treated on the same professional level as the other employees. 1 2 3 4 5 NA

Comments: __________________________________________________________

12. This internship helped you to clarify your career goals. 1 2 3 4 5 NA

Comments: __________________________________________________________

13. You felt as though your participation was an integral part of the work being done. You felt like part of the team. 1 2 3 4 5 NA

Comments: __________________________________________________________

14. You had adequate time to observe the various departments/divisions operations of the organization. 1 2 3 4 5 NA
15. Your academic education at Hampton University was helpful in preparing you for your internship (or world of work in general). If not, please list what would have been helpful below.

Comments: ________________________________________________

16. The internship experience changed your earlier decisions (during pre-registration) on the selection of courses for the coming year in your program.

Comments: ________________________________________________

Please provide your responses to the following questions:

17. What was the most valuable aspect of your internship?

_________________________________________________________

_________________________________________________________

18. What was the least valuable aspect of your internship?

_________________________________________________________

_________________________________________________________

19. Would you consider working for this organization?

___________ Yes  _____________No

20. Did you develop skills that will be valuable to you in your future career? If so, please list them below.

_________________________________________________________

_________________________________________________________

21. Were you able to apply existing skills? If so, please list them below.

_________________________________________________________

_________________________________________________________
22. Would you recommend this internship to other students? 
   If yes, why? If not, why not?
   __________________________________________________________
   __________________________________________________________

23. If this were a course, what grade would you assign this internship experience?
   __________

Name (print)________________________________________
Signature________________________________________
Phone ___________________________________ Date_________________

Please fax, mail or e-mail this form to:

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