## AGENCY EVALUATION OF STUDENT INTERN

Sociology 393 Independent Experiential Internship

Name of Intern:						
Name of Agency Supervisor:						
Name of Faculty Supervisor:						
Name of Agency:						
Agency Phone #:						
Agency Email Address:						
The agency supervisor should com the evaluation with the students.	plete this evaluat	tion of th	ie inter	n. The	supervisor sh	ould discuss
A. Please rate the intern's per	rformance by che	cking the	e appro	priate b	OX:	
	NO OPPORTUNITY TO OBSERVE	POOR	FAIR	GOOD	EXCELLENT	TRULY EXCEPTIONAL
1. Maintained contact with supervisor.						
2. Punctual for work and						
<ul><li>appointments.</li><li>3. Completed assignments on or before the due date.</li></ul>						
4. Reliably performed all job assignments.						
5. Achieved goals and objectives in contract.						
6. Ability to solve problems.						
7. Productive in work.						
8. Organization skills.						
9. Oral communication skills.						
10. Written communication skills.						
11. Ability to work independently.						
12. Willingness to learn new tasks.						
$13. \ Ability to work well with coworkers.$						
14. Ability to work well with clients, public.						
15. Eagerness to learn.						
<ul><li>16. Enthusiasm for work.</li><li>17. Initiative, persistence.</li></ul>						
18. Productivity.						
19. Compliance with agency						
procedures.  20. Overall assessment of work quality.						
21. Maturity.						
22. Ability to accept constructive criticism.						
23. Open-mindedness.						
<ul><li>24. Courtesy, tact, and consideration for feelings of others.</li><li>25. Professional appearance.</li></ul>						
z.s. Professionalappearance.	1	1	1	1	1	i .

B.	Taking into	<b>OVERALL RECOMMENDATION</b> Taking into consideration all factors, whether rated above or not, what is your overall evaluation of this intern? (Circle one)									
	POOR	FAIR	GOOD	EXCELLENT	TRULY	EXCEPTIONAL					
C.		ern complete thesNo	_	mum of 100 hours o	f work?						
D.	COMMENT	'S:									
E.				in the future?							
	Thank you	for your suppo	rt of this interns	ship program.							
Cime	akana and mud	a of Agon as Court			Det						
Signa	iture and 11th	e of Agency Sup		Date							

PLEASE RETURN COMPLETED FORM AS SOON AS POSSIBLE TO THE <u>STUDENT'S FACULTY SUPERVISOR</u> at the address below. The student cannot receive a grade until this form is returned:

(FACULTY SUPERVISOR'S NAME)
SOCIOLOGY DEPARTMENT
THE UNIVERSITY OF NORTH CAROLINA at CHAPEL HILL
CB #3210, HAMILTON HALL
CHAPEL HILL, NC 27599-3210