FACULTY OF FINE ARTS, DESIGN AND ARCHITECTURE DEPARTMENT OF ARCHITECTURE

Intern Evaluation Report

*We kindly request that this form be completed by the staff member who supervised the student during their internship, and handed to the student in a sealed envelope with the flap initialed.

Dear Sir/Madam,

Intern Name,

This evaluation form has been designed for you to assess the performance of our student. Your sincere responses are important for our university, as they will allow us to identify the shortcomings of our students and address them in our practical training program. We would like to thank you for providing our student with the opportunity to complete their internship in your organization and for the time you have dedicated.

Internship Type: Office / Construction Supervisor's Name, Last Name Supervisor's Contact Information Internship Start Date - End Date: Start Date - Date / Signature and Stamp of the Supervisor All pages of the internship report have been checked and approved by me. Signature: Very poor average good excellent comments Internship Attendance Status Effort and Interest in Work Ability to Complete Tasks on Time and Successfully Basic Professional Knowledge & Skills Ability to Use Equipment							Last Name
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