

Exercise Science Program: Professional Practicum, EXSC 499
STUDENT PERFORMANCE EVALUATION

Name of Student-Intern: _____

Supervisor: _____ **Title:** _____

Organization: _____ **Location:** _____

Instructions: The immediate supervisor(s) of the student-intern will objectively evaluate the performance and potential of the student compared to other interns of comparable education and experience.

	<u>Excellent</u>	<u>Very Good</u>	<u>Average</u>	<u>Below Average</u>	<u>Poor</u>
1. Attendance	_____	_____	_____	_____	_____
2. Professionalism	_____	_____	_____	_____	_____
3. Quality of Work	_____	_____	_____	_____	_____
4. Relationship with coworkers	_____	_____	_____	_____	_____
5. Interactions with public	_____	_____	_____	_____	_____
6. Communication ability	_____	_____	_____	_____	_____
7. Knowledge of human Movement & exercise	_____	_____	_____	_____	_____
8. Knowledge related to field	_____	_____	_____	_____	_____
9. Judgment	_____	_____	_____	_____	_____
10. Dependability	_____	_____	_____	_____	_____
11. Motivation to be successful	_____	_____	_____	_____	_____
12. Overall performance	_____	_____	_____	_____	_____
13. Potential in the field	_____	_____	_____	_____	_____

14. Strengths of Student: _____

15. Weakness of Student: _____

16. If an appropriate position were available, would you hire this student? ___ yes ___ no

17. Additional Comments (if needed use back):