



**GARDEN CITY UNIVERSITY COLLEGE
INTERNSHIP PROGRAM**

Site Supervisor Evaluation

Student Name:	Date:
Internship Site:	
Site Supervisor:	

Please circle the number on the scale which best describes the student intern's performance.

PERSONAL QUALITIES

	Unsuitable				Neat
Appearance	1	2	3	4	5
	Awkward/Timid				Poised/Confident
Maturity	1	2	3	4	5
	Uninterested				Enthusiastic
Attitude	1	2	3	4	5
	Uncooperative				Cooperative
Cooperation	1	2	3	4	5
	Has difficulty w/others				Works well w/others
Interpersonal Relations	1	2	3	4	5

WORK HABITS

	Disorganized				Organized
Organization	1	2	3	4	5
	Slow to learn				Learns quickly
Ability to Learn	1	2	3	4	5
	Needs monitoring				Able to work alone
Initiative	1	2	3	4	5
	Poor				Excellent
Judgment	1	2	3	4	5
	Neglectful				Dependable
Responsibilities	1	2	3	4	5
	Irregular				Regular
Attendance	1	2	3	4	5
	Tardy				On time
Punctuality	1	2	3	4	5

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WORK PERFORMANCE

	Low output				High output
Quantity of work	1	2	3	4	5
	Poor				Excellent
Quality of work	1	2	3	4	5

What do you consider to be the outstanding personal qualities/strengths of the intern?

What do you consider to be the weakness of the intern?

How can the student work to improve these areas?

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Have there been any problems? Please explain the problems and if/how they have been resolved.

Do you have any recommendations regarding the Garden City University Internship program?

Please return this to: Assistant Registrar

Garden City University College,

Box 12775,

Kumasi.

studinterns@gcuc.edu.gh

**Thank you for participating in the evaluation of this Garden City University College student intern.
You may share your feedback with the student.**

Date:.....

Signature:.....

Office stamp.....