



Intern Evaluation Intern Final Evaluation

STUDENT/ INTERN NAME: _____

Evaluation for period from _____ to _____ Total hours worked during this period: _____

EMPLOYER/ HOST ORGANIZATION: _____

Name & Position of Supervisor during this evaluation period: _____

Phone Number: _____ E-mail address: _____

Intern Signature: _____ Date: _____

INTERNSHIP EVALUATION:

1. Please list the principal activities you performed during the final evaluation period of this placement:

- A.
- B.
- C.
- D.

2. Please evaluate the extent to which your supervisor:

	excellent	good	average	poor	n/a*
Attended to the details of your internship					
Provided you with diverse opportunities					
Provided quality instruction					
Delegated responsibility					
Communicated his/ her expectations					
Gave you regular feedback on your work					
Encouraged independent learning					
Solicited and considered your ideas					
Demonstrated interest in your goals					
Was available to address questions and concerns					
Made improvements to the internship based on a previous evaluation					

*n/a = not applicable

3. How did this placement compare with your expectations?

4. Note any problems, issues and resolutions that have not been noted on previous evaluations.

5. What would you say are this internship's:

a) strongest points:

b) weakest points:

6. Please comment on the following statements:

As a result of this internship I have:

	yes	unsure	no	n/a
gained skills, experiences, and contacts that may benefit my career.				
developed a greater sense of optimism about the future of music, and my own future.				
learned skills that will complement my career as a musician/ educator.				
gained professional contacts that will/ could lead to an offer of full time employment.				
gained perspective on the music world, and my potential role in it.				
The ALP Operations Manager was:				
helpful in finding me an appropriate internship.				
always available and responsive to questions.				
made a good match between me and my internship host.				

7. In what ways, other than those mentioned above, have you grown or changed as a result of this internship?

Please feel free to use the back of this form or additional paper to respond to these questions, and to comment on any aspect of this internship that you wish. The information provided herein is Eastman confidential and will be used for internal purposes of the Arts Leadership Program only.

Return to Assistant Director, Catherine Filene Shouse Arts Leadership Program
Eastman School of Music, 26 Gibbs Street, Rochester, NY 14604 585-274-1112 fax 585-274-1047