



Student Intern Job Site Evaluation Form WMST 3930 – Women and Gender Studies Internship

Instructions: This form is designed to give you, the student, an opportunity to evaluate the quality of your internship. Please fill out this form and turn it in with your final project. This form is required as part of your assessment for a grade.

Student Name: _____

Semester and year of your internship: _____

Organization: _____

Address: _____

Phone: _____ **E-Mail:** _____

Supervisor's Name and Title: _____

Rate the quality of your internship on a scale from 1 (not a valuable experience) to 5 (a rewarding and excellent experience):

1 2 3 4 5

In what way did the internship meet your expectations? Explain.

If the internship did not meet your expectations, please explain.

What can the Department of Women and Gender Studies do to improve the internship experience?