

Date: _____

Students Name: _____

Company: _____

Supervising Department: _____

Supervisor's Title: _____

Student's Title: _____

Description of the Interns Duties:

Evaluation of the Interns Performance:

Please note that if you mark "poor", the student will not pass the internship course.

- Excellent
- Good
- Moderate
- Poor

Supervisors Signature: _____

Contact Email: _____

Please email completed evaluation forms to Professor Caskey at the following email address: george.abe@anderson.ucla.edu. Evaluations are due by the end of the term. Failure to turn in the evaluation form by the end of the term will result in a NO PASS for the course. If your internship employer has a policy prohibiting the completion of this form, such as the use of a standardized form, then complete the "Description of the Interns Duties" section of this form, along with the header information, and submit it along with the employer's equivalent documentation. If you have any questions, please call (310) 206-8711.