SCHOOL OF BUSINESS

STOCKTON UNIVERSITY

Employer Evaluation Form

Thank you for taking your time to complete this evaluation. Your detailed comments will help us to create a stronger internship program at Stockton College. Feel free to discuss this evaluation with your intern.

1. Biographical Information:						
Stockton Student Intern's Name	:					
Your Name and Title:						
Your Organization	-					
Your Email:						
rour Email.	-					
2. To what extent do you agree	with the follo	wing statem	nents?			
		Strongly			Strongly	Cannot
		Agree	Agree	Disagree	Disagree	Rate
The student is punctual.						
The student dresses appropriate	ely.					
The student carries out assigned efficiently.	d duties					
The student does careful and th work.	orough					
The student works well indepen	idently.					
The student demonstrates know basic concepts in this field or dis	•					
The student collaborates and cowell with others.						
The student shows a desire to me concepts in the field.	naster key					

K:\Internships\Forms Updated: 8/24/2015

The student is an asset to our organization.

 DMH

	Excellent	Good	Fair	Poor	Cannot Rate
					ra
Vritten Communication					
/erbal Communication					
Computer Skills					
Ability to Learn					
Quality of Work					
Attitude					
Professionalism					
Overall Performance					
. Would you hire t rganization?	:his student full-ti	ime upon gradu	uation if an opport	unity existed in	your
Yes			No		_ Unsure
ork:					on with the quality of th

Name: ____ Page 2 of 2 Employer Evaluation Form,

SCHOOL OF BUSINESS STOCKTON UNIVERSITY

5. May we use your comments and share them on our website and publications?							
V	N						
Yes	No						
Thank you for your responses to the evaluation and work	ng with the School Business Internship Program.						

K:\Internships\Forms Updated: 8/24/2015

DMH