



**Houston Community College  
Department of Digital Communications  
Intern Evaluation**

Semester: \_\_\_\_\_ Year: \_\_\_\_\_

Student Name: \_\_\_\_\_

Company Name: \_\_\_\_\_

Supervisor: \_\_\_\_\_ Telephone: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ E-mail: \_\_\_\_\_

Please provide the following information about the student's internship. All information provided will be confidential and, unless you wish, will only be discussed with the student in general terms. This questionnaire should be emailed back to me directly as an attachment at [lloyd.Schuh@hccs.edu](mailto:lloyd.Schuh@hccs.edu). If you have problems with e-mail, you may fax it to me at: 713.718.7990.

Approximate number of hours worked since beginning internship: \_\_\_\_\_

Duties: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Did the student show up on time? \_\_\_\_\_ Did the student take responsibility for his/her work? \_\_\_\_\_

On a scale of 1 through 5 with 1 being poor and 5 being excellent please rate the student's work \_\_\_\_\_

Was the student's appearance business-like and proper for his/her duties: \_\_\_\_\_

Did the student have the needed skills to complete the assignments? \_\_\_\_\_ If not, what was needed? \_\_\_\_\_

Any additional comments that you have regarding the student or his/her work: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signed: \_\_\_\_\_ Date: \_\_\_\_\_  
(If submitting electronically, just type your name)

May I share this information with the Intern Student? Yes ( ) No ( )