

INTERNEE EVALUATION FORM

Kindly fill in the following details required for evaluating the performance of our student as employee in your organization

Name of the Organization : _____
 Department : _____
 Evaluator's Name : _____
 Designation : _____
 Cell No : _____ Email : _____
 Internee's Name : _____
 Internship started : _____ Finished : _____

Kindly evaluate the Internee on the scale 1 to 5
 (1 = Excellent, 2 = Very Good, 3 = Good, 4 = Fair, 5 = Poor, 6 = Not Applicable)

	1	2	3	4	5	6
Knowledge:						
Research Skills						
Ability to link theory to practice						
Ability to devise an alternative / system / process to solve issue in hand or one that may arise in future						
Problem identification and solving skills						
Subject Knowledge (Management Sciences or Engineering Sciences)						
Ability to learn						
Communication Skills:						
Presentation skills						
Oratory Skills						
Report writing						
Interpersonal Skills:						
Motivation						
Integrity						
Leadership						
Confidence						
Ability to work in teams						
Work Skills:						
Discipline						
Time management skills						
Growth prospects in the corporate world						
Appreciation of ethical values						

If a position exists in your company would you strongly recommend / recommend / not – recommended the above internee. **(Kindly tick the appropriate one)**

 Signature of Evaluator
 Company Seal