

EVALUATION

OF INTERNSHIP

Intern: _____ Mentor: _____ Date: _____

Please rate the following on a scale of 1 – 5; (1) Definitely Not, (2) Not Much, (3) Somewhat, (4) Yes, (5) Absolutely	5	4	3	2	1
Did you feel that this internship was valuable?					
Did you feel that you were properly on boarded to the firm and the team?					
Did you feel the work you were assigned made an impact on the company?					
Were you told how the projects you were working on would add value?					
Was your mentor interested in your success?					
Was your mentor available to answer any questions you had?					
Did you get what you expected out of this internship?					
Would you recommend this internship to a friend?					
What did you like most about this internship program?					
What did you like least?					
What areas could ABC Company improve on for next year?					