## **Intern Performance Evaluation Form Intern Name:** Company: 1. Attitude/Enthusiasm 2. Initiative Fair Poor Fair Poor Good Good 3. Ability to Learn 4. Attendance/Punctuality Fair Poor Fair Poor Good Good 5. Team Interaction/Effectiveness 6. Skill Development Fair Fair Poor Good Poor Good **Supervisor's Comments: Intern's Comments:** Supervisor Signature Date Intern Signature Date Human Resources Signature (if applicable) Date

Date

NGRUFY Executive Director Signature