

COLLEGE *of* VISUAL ARTS

INTERNSHIP SPONSOR FINAL EVALUATION
INTERNSHIP PROGRAM

Intern's Name: _____ Date: _____

Internship Sponsor: _____

Internship Sponsor Supervisor: _____

Sponsor telephone _____ email: _____

Hours and days of internship: _____

1. Describe the student's responsibilities: _____

2a. Was the student well prepared to assume these responsibilities? Please explain. _____

2b. . If not, what would better prepare a student? _____

3. How many hours per week did the student intern? _____

4. Please describe the student's work ethic:

Punctuality: _____

Attention to details: _____

Appearance: _____

Other comments: _____

5. Other comments: _____

6. Are you interested in having other CVA interns in the future? _____

7. What would you like our students to know about your organization? _____
