

# Student Self-Evaluation

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## University of Central Arkansas College of Business Internship Program

*Complete the student self-evaluation form and submit it to the appropriate Department Chairperson/Faculty Supervisor upon completion of your internship.*

Department and Course Number: \_\_\_\_\_

Internship Name/Title: \_\_\_\_\_

Date: \_\_\_\_\_ Internship Year: \_\_\_\_\_ Term:    Fall    Spring    Summer

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Sponsoring Organization: \_\_\_\_\_

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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*The purpose of this evaluation is for you to reflect on your performance and make a candid assessment of your contributions and efforts over the course of the internship.*

*Use a scale of 5 - Superior Performance, 4 - Exceeded Expectations, 3 - Met Expectations, 2 - Lower than Expectations, 1 - Failed*

### Job Performance

- |   |   |   |   |   |   |
|---|---|---|---|---|---|
| 5 | 4 | 3 | 2 | 1 | Produces work assignments in terms of quality, quantity, and timelines                              |
| 5 | 4 | 3 | 2 | 1 | Considers all facts and circumstances to determine order of importance and reach logical decisions. |
| 5 | 4 | 3 | 2 | 1 | Works well under pressure, adapts to change and persons of varying personalities                    |

### Personal Development Initiative

- |   |   |   |   |   |  |
|---|---|---|---|---|--|
| 5 | 4 | 3 | 2 | 1 | Asks pertinent and purposeful questions          |
| 5 | 4 | 3 | 2 | 1 | Works to achieve agreed upon learning objectives |
| 5 | 4 | 3 | 2 | 1 | Accepts and applies constructive feedback        |
| 5 | 4 | 3 | 2 | 1 | Exhibits an appropriate degree of initiative     |
| 5 | 4 | 3 | 2 | 1 | Willingness to learn new tasks                   |
| 5 | 4 | 3 | 2 | 1 | Willingness to follow instructions               |

### Professionalism

- |   |   |   |   |   |  |
|---|---|---|---|---|--|
| 5 | 4 | 3 | 2 | 1 | Work is acceptable/meets established requirements        |
| 5 | 4 | 3 | 2 | 1 | Demonstrates appropriate behavior in the work place      |
| 5 | 4 | 3 | 2 | 1 | Punctual, reliable, and available during scheduled hours |
| 5 | 4 | 3 | 2 | 1 |  |



What task(s) did you like most/least? Why?

Most:

Least:

**Professional/Personal Development**

Identify the three most important abilities/skills/characteristics that you developed as a result of this internship experience and briefly explain your reasoning.

1)

2)

3)

## Learning Goals

List your 3 most important learning goals for this placement. Comment on your progress to date and if you have encountered any obstacles in reaching your goals.

1)

2)

3)

What academic courses have proved valuable in performing this internship?

What additional coursework and/or experience would be helpful in order to improve your future career success?

If you could continue in your present internship, in what areas would you like to become involved to enhance your learning and career growth?

Has this experience affected your educational and/or career plans? How?

