## FORM III-C AGENCY FINAL EVALUATION OF INTERN

Intern Name: Agency:

Please complete the following intern evaluation (MS Word version with embedded text boxes for each line is available at <a href="http://www.wiu.edu/coehs/leja/fire/index.php">http://www.wiu.edu/coehs/leja/fire/index.php</a>, Current Students, Internship Forms). For each trait listed decide which description most nearly applies to the intern being rated, and place a check mark in the appropriate space provided. *You may choose to complete Form III-A, B, or C, and only one form is requested.* Please mail the completed form to Internship Coordinator, WIU - LEJA, 1 University Circle, Macomb, IL 61455, or e-mail it to <a href="jesswanson@wiu.edu">jesswanson@wiu.edu</a> (your professional e-mail address will represent your signature).

Outstanding Very Good Good Improvement Exposed

## I. Knowledge

- 1. General knowledge of subject matter related to internship area.
- 2. Knowledge sufficient to understand functions and structure of department.
- 3. Identifies and obtains needed information about agencies policies and procedures.
- 4. Identifies and obtains needed information about written and unwritten policies and procedures.

## II. Performance

- 1. Ability to schedule activities and/or follow through schedules.
- 2. Ability to learn new skills, methods, and ideas
- 3. Ability to complete tasks adequately and promptly.

	Outstanding	Very Good	Good	Needs Improvement	Not Exposed
IV. Professional Discipline					
1. Ability to plan ahead, schedule, and lay out work so as to make the most effective use of personnel, materials and equipment.	_	_			
2. Adheres to standards of behavior of your agency.					
3. Observes required working hours.					
4. Reports to assignments on time and is willing to make-up absences.					
V. Use of Supervision					
<ol> <li>Brings questions and plans to supervisor.</li> </ol>					
2. Shares responsibility for evaluating					
<ul><li>own strengths and weaknesses.</li><li>3. Accepts authority inherent in</li></ul>					
supervisors.					
4. Asks for and uses supervisor's help in enhancing knowledge and skills.					
VI. Overall Rating					
Comments by Agency Coordinator (and/o	r other agency	representatives	s):		
Submitted by					
Submitted by(Typed or Printed)				(Title)	
(Signature)				(Date)	