

INTERNSHIP EMPLOYER'S REPORT

<p>Student Instruction: Give this report to your employer to complete at the end of the Internship/Co-op. You should deliver or mail this form to the OCOB Advising Center by the due date indicated on your contract.</p>					
<p>Employer Instruction: Your candid assessment of our students is critically important to their development. Please take the time to complete this form, and give this report to the student (in a sealed envelope) at the end of the placement. The Employer's Final Report must be completed at the conclusion of the Internship.</p>					
Name of Intern/Co-op	Date				
Company Name	Address				
<p>SCALE - Using the scale provided, please indicate the degree to which the student demonstrated each of our program's learning objectives in the context of their Internship. SD = Strongly Disagree D = Disagree A = Agree SA = Strongly Agree NA = Not Applicable</p>					
PROGRAM LEARNING OBJECTIVES	SD	D	A	SA	NA
1. Demonstrated breadth of knowledge and skill in general business fundamentals.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Demonstrated depth of knowledge, skill, and perspective within their selected, specific business discipline (e.g. finance, accounting, marketing, management, human resources, industrial technology, economics).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Recognized the ethical dimensions of business decisions.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Recognized the wider responsibility of business organizations for societal level outcomes above and beyond firm level profit or loss.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Demonstrated the ability to generate innovative solutions to business problems that are supported by appropriate data analysis and evaluation of alternatives.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Understands diverse perspective and can generate solutions that incorporate them.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Demonstrated effective writing.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

8. Demonstrated effective speaking skills.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Demonstrated effective peer leadership.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Demonstrated effective participation in teams.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Engaged in career-related interaction with business professionals and industry leaders.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

OPINIONS - Please provide your opinions on the following questions or statements. These answers should be related to the total, overall performance of the intern.

1. What do you feel were the dominant strengths and weaknesses of the intern?
2. Generally speaking, are you satisfied that your company benefited from participation in the Internship/Co-op program, insofar as it involves this student?
3. Are you satisfied with the overall Internship/Co-op program? What suggestions do you have, if any, for improving the program?

OVERALL EVALUATION: Please check the number that best summarizes the overall performance of the Intern/Co-op, and the grade percentage you'd assign them.

0 30 40 50 55 60 65 70 75 80 85 90 95 100

 Poor -----Fair -----Good -----Excellent -----Outstanding

 Signature, Supervising Signature

 Printed name and Position/Title

 Telephone Number

 Email Address