MUSEUM STUDIES MINOR

STUDENT INTERNSHIP EVALUATION FORM

Name of student intern \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Administrative Coordinator supervisor \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of site supervisor \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of internship: Start \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ End \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Grade (S/U):\_\_\_\_\_\_\_

Comments by Administrative Coordinator Supervisor:

Comments by Internship Supervisor:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Internship Supervisor signature (electronic printed acceptable), Date:

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Museum Studies Minor Office Use Only:

Date Form Filed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_