

GEM INTERN FINAL EVALUATION BY SUPERVISOR

Please evaluate the GEM intern assigned to you for the summer. Complete each section based upon your observation of the intern's assignment, responsibilities and performance.

Thank you in advance for your cooperation and assistance. If you have any comments or questions regarding the evaluation or the GEM Program, please contact GEM at (202) 457-8672

(Please
print/type)

Intern's Name: _____

Employer: _____

Salary: _____

Department: _____

Division: _____

Site Location: _____

Supervisor: _____

Telephone: _____

Supervisor's Title: _____

Start Date: _____

End Date: _____

1. What was the intern's primary assignment and responsibility?

2. Please rate the intern on the following:

	Excellent	Good	Fair	Poor
A. Relationship with others in the work environment				
B. Initiative/attitude toward work				
C. Judgment (ability to make good decisions)				
D. Dependability (attendance, punctuality)				
E. Ability to work independently/complete assignment				
F. Timeliness of output				
G. Technical knowledge/analytical skills				
H. Level of performance in producing tangible results				
I. Ability to recognize problems and respond with favorable solutions				

3. Please rate the intern's progress during the summer (check only one)

	Excellent	Good	Fair	Poor
A. Generally improved				
B. Remained about the same				
C. Generally regressed				

A GEM Fellow is required to return to the same employer each summer until the master's degree program has been completed.

4. Intern's overall performance	Satisfactory	Unsatisfactory*
	<input type="checkbox"/>	<input type="checkbox"/>

Please use the space below for Comments:

My supervisor has discussed this report with me.

Intern's Signature

Date

Supervisor: *Please return this completed form to your company's GEM representative.*

Supervisor's Signature

Date

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