J-1 Student Intern Evaluation Form

Complete and submit this form to the International Center within 15 days of the student intern's program end date. If the internship is longer than six months, you must also use the form to complete and submit a midpoint evaluation within 15 days of the midpoint of the internship. Both the supervisor and the intern must sign the form.

TODAY’S DATE: __________________________

PLEASE CHECK ONE:

☐ Midpoint Evaluation (for internships longer than 6 months)
☐ Conclusion Evaluation

STUDENT INTERN INFORMATION

Last Name________________________________First Name___________________________________
Phone Number ______________________ Email Address______________________________________
Internship Start Date _____________________________ Internship End Date ______________________

SUPERVISOR INFORMATION

Last Name ______________________________ First Name____________________________________
Academic Department __________________________________________________________________
Phone Ext. _________ Email Address _________________________________________________

ASSESSMENT

The supervisor should answer each of the first 4 questions thoroughly. Please consult the Training/Internship Placement Plan (DS-7002) if necessary.

1. How has the student met the goals and objectives of this internship?

2. In what cultural activities has the student participated while in the U.S.?

3. What specific knowledge, skills, or techniques has the student learned?

4. How has the student demonstrated acquisition of these skills and competencies?

5. Additional remarks (optional):

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STUDENT REMARKS (optional):

SIGNATURES

_______________________________________  ______________________________________
Supervisor                                      Student

_____________  ______________
Date                                              Date