



Rocky Mountain College - Office of Career Services Intern Mid-Term Evaluation

Intern's Name: _____

Internship Site: _____

The evaluation of your student intern mid-way through the semester provides important feedback necessary for student development and faculty assessment. Please complete and return to careerservices@rocky.edu or 406-259-9751 (fax).

1. Is your student intern making satisfactory progress toward his/her goals?

Yes _____ No _____ (If no, please explain)

2. Are there any performance issues that need to be addressed with your student intern (i.e. punctuality, professionalism, acceptable work performance, etc)?

Yes _____ No _____ (If yes, please explain)

3. If you deem a site visit helpful or necessary, Career Services is happy to do so. If you would like to schedule a visit, please complete the following (visits typically last 30 min.):

Preferred Date _____ Preferred Time _____

4. Please comment on your intern's strengths and goals at this point in the internship.

PLEASE RETURN TO:

Rocky Mountain College Career Services
1511 Poly Drive • Billings, MT 59102
PH 406.657.1039 • F 406.259.9751 • careerservices@rocky.edu