



# QUIP QUEEN'S UNDERGRADUATE INTERNSHIP PROGRAM

## **Student Work Performance Evaluation – 8 Month**

### **PART 1. Supervisor's Evaluation**

**Guidelines:** Please rate the student's performance in each of the following categories by checking the box which best indicates their performance and providing individualized comments where appropriate.

**DATE:** \_\_\_\_\_

#### **Student Information:**

<b>Student Name:</b>	<b>Job Title:</b>
<b>Degree Program:</b>	<b>Company Name:</b>
<b>Key Job Duties:</b>     	

#### **Employer Information:**

<b>Supervisor Name:</b>	<b>Job Title:</b>
<b>Phone:</b>	<b>Email:</b>

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#### **QUIP Contact Information:**

##### **Queen's University | Career Services**

QUIP Coordinators

Tel: 613-533-2992

Fax: 613-533-2535

Email: [quip@queensu.ca](mailto:quip@queensu.ca)

Website: <http://careers.queensu.ca>

## 1. QUALITY OF WORK

<input type="checkbox"/> Very thorough. Errors few if any.	<input type="checkbox"/> High level. Only occasional corrections needed.	<input type="checkbox"/> Work usually passes review. Some errors.	<input type="checkbox"/> Erratic quality. Not thorough. Work review required.	<input type="checkbox"/> Not measurable/Applicable.
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**Comments:**

## 2. QUANTITY OF WORK

<input type="checkbox"/> Exceptionally fast, efficient. Often handles extra work.	<input type="checkbox"/> Deadlines always met. Willing to handle extra work.	<input type="checkbox"/> Steady results. Usually on time with assignments.	<input type="checkbox"/> Frequently late in completing assignments. Needs prodding.	<input type="checkbox"/> Not measurable/applicable.
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**Comments:**

## 3. INITIATIVE AND DEDICATION

<input type="checkbox"/> Self-starter. Seeks challenge. Attacks problems, solves on own.	<input type="checkbox"/> Needs minimal supervision. Tries to exceed standards.	<input type="checkbox"/> Puts generally good effort into work. Meets standards.	<input type="checkbox"/> Shows minimal interest in meeting standards. Needs close supervision.	<input type="checkbox"/> Not measurable/applicable.
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**Comments:**

## 4. COOPERATION AND TEAMWORK

<input type="checkbox"/> Always works in harmony with others. Great team player.	<input type="checkbox"/> Congenial and helpful. Works well with associates.	<input type="checkbox"/> Most relations with others are harmonious under normal conditions.	<input type="checkbox"/> Difficult to work with at times. Sometimes antagonizes others.	<input type="checkbox"/> Not measurable/applicable.
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**Comments:**

## 5. JUDGEMENT

<input type="checkbox"/> Unusual ability to develop alternatives. Openly accepts responsibilities.	<input type="checkbox"/> Good methodical thought processes. Good problem solving. Seeks counsel when necessary.	<input type="checkbox"/> Makes decisions based on company policies. Generally, seeks counsel.	<input type="checkbox"/> Lacks confidence. Seeks supervision. Avoids responsibilities.	<input type="checkbox"/> Not measurable/applicable.
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**Comments:**

## 6. LEADERSHIP

<input type="checkbox"/> High desire to achieve. Tactful. Excellent example for other workers.	<input type="checkbox"/> Good tolerance level. Accepts new challenges. Sets good examples.	<input type="checkbox"/> Calm and tactful. Displays patience. Tries to learn from criticism.	<input type="checkbox"/> Sometimes tactless. Reluctantly accepts criticism and ideas of others.	<input type="checkbox"/> Not measurable/applicable.
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**Comments:**

## 7. ADAPTABILITY

<input type="checkbox"/> Adapted instantly and successfully. Makes others comfortable.	<input type="checkbox"/> Adapted quickly and successfully. No problems.	<input type="checkbox"/> Comfortable in the workplace. Few problems.	<input type="checkbox"/> Uncomfortable in the workplace. Reluctant to attempt change.	<input type="checkbox"/> Not measurable/Applicable.
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**Comments:**

## 8. WRITTEN COMMUNICATION

<input type="checkbox"/> Always clear, well organized, and easily understandable.	<input type="checkbox"/> Usually clear, well organized, and understandable; needs occasional checking/editing.	<input type="checkbox"/> Sometimes clear and organized; requires some checking and editing.	<input type="checkbox"/> Not consistently clear and concise; requires frequent checking and editing.	<input type="checkbox"/> Not measurable/applicable.
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**Comments:**

## 9. ORAL COMMUNICATION

<input type="checkbox"/> Always clear, well organized, easily understandable; excellent public speaker	<input type="checkbox"/> Usually clear, well organized, and understandable; comfortable speaking/presenting to groups	<input type="checkbox"/> Sometimes clear and organized, developing public speaking skills	<input type="checkbox"/> Occasionally encounters difficulty with expressing ideas clearly; some discomfort with public speaking	<input type="checkbox"/> Not measurable/applicable.
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**Comments:**

## General Feedback:

### MAJOR STRENGTHS

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**AREAS FOR IMPROVEMENT****OVERALL PERFORMANCE****SUPERVISOR:**

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Supervisor (**Name**)

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Signature (**Signature**)

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Date**STUDENT:**

I, \_\_\_\_\_ (student name), have read this evaluation and discussed it with my supervisor. I feel that it is a fair assessment of my performance.

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Student (**Name**)

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Student (**Signature**)

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Date**Student Comments:**

**Student Work Performance Evaluation – 8 Month**  
**PART 2. Student's Self-Evaluation**

**CAREER / SKILLS DEVELOPMENT**

Student Name: \_\_\_\_\_

As discussed in the pre-departure workshop, your internship provides you an excellent opportunity to add new skills to your professional portfolio. This section of the evaluation will help you articulate some of your developing skills and give you an opportunity to reflect on your progress throughout your internship.

For your 4-month evaluation, you were asked the question:

***What prompted you to decide to take this internship and what specific skills including those outside of the obvious technical skills, are you hoping to gain from your internship?***

You are now almost 8 months into your work term, with time to have worked on some of these objectives. You have also had time to reflect on some of your accomplishments and/or set goals to ensure that you accomplish your objectives. Listed below are some common replies to the 4-month evaluation question listed above; you will notice several similar themes:

- Apply my education.
- Gain insight into future career paths.
- Communicate effectively.
- Gain a level of maturity.
- Learn what the working world feels like
- Gain communication skills.
- Improve time management and organization skills.
- How to professionally interact with coworkers.
- Learn about the structure of an office.
- Networking opportunities.
- Gain a wealth of technical experience.
- Learn some practical skills that would hopefully put into perspective the application of my academic skills.
- See real life applications.
- Gain a lot of soft skills such as presentation, networking, and communication.
- A taste for what it is like to work as a full-time employee.

**The 4 most common goals across QUIP interns are:**

1. *Gain experience.*
2. *See what the workplace is like.*
3. *Develop professional and technical skills.*
4. *To network.*

This 8-month career/skills development evaluation will encourage you to think about these four topics. Please reflect on what you are taking away from your internship, and how your internship will provide you with a foundation for the job search process in your final year.

**1. GAIN EXPERIENCE – Give an example of a new experience you have had at work?**

- 2. EXPLORE THE WORKPLACE – How have you found the transition from school to work? Is it what you thought? (easier/harder/more difficult/a breeze) What are the best and worst aspects of the workplace?**

- 3. DEVELOP SKILLS – What professional skills have you gained during your internship? How have you applied them and how have they benefited you personally? (e.g., skills such as communication, organization, and time management)**

- 4. NETWORKING – The internship is an excellent opportunity for you to meet new colleagues in the workplace. Have you taken advantage of networking opportunities during your internship? What have you done to expand your list of either potential employers or potential coworkers?**

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Student (**Name**)

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Student (**Signature**)

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Date

## Student Testimonial – 8 Month

**QUIP values comments from student interns. Please consider sharing your thoughts about your internship experience thus far, and what makes QUIP a good experience. Providing the comment below signifies your permission to allow us to use the quote for promotion.**

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Student (**Name**)

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Student (**Signature**)

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Date