**Learning through Internship Program Evaluation**

1. Do you consider this intern experience a success for the student, if so in what ways?
2. In what ways did this intern experience benefit your organization?
3. What challenges did your organization experience during the internship?
4. Did you receive sufficient information regarding the Internship Program?
5. Were you able to communicate concerns and successes with the Supervisor as needed?
6. What recommendations do you have to improve this program?
7. Can you suggest the name and address of another employer who may be interested in learning more about the Learning through Internship Class?

\_\_\_\_Yes \_\_\_\_\_NO Perry Schools has permission to publish comments or quotes from this evaluation.

 for Perry Schools marketing materials.

 \_\_\_\_Yes \_\_\_\_\_NO Perry Schools has permission to publish pictures of myself or my company for

 Perry Schools marketing materials.

NAME\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_DATE\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 NAME OF ORGANIZATION\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 SIGNATURE\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

STUDENT INTERN(S) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please fax to 440-259-3607 or email this form to the Director of Student Services and College & Career Readiness, Amy Harker, at harkera@perry-lake.org.