

Internship Evaluation (for Intern)

Instruction Sheet:

In order for KUSCO to ensure the quality of internship programs, an Intern should complete the Intern Evaluation Form as attached and return it to KUSCO.

1. All required evaluations must be completed prior to the conclusion of a training and internship program.
2. This form should be completed by the intern.
3. Both interns and their immediate supervisors must sign the evaluation forms.
4. For programs exceeding six months' duration, at a minimum, mid-term and final evaluations are required. For programs of six months or less, at a minimum, final evaluations are required.
5. Attached forms are for mid-term evaluation and final evaluation. Keep and use the correct evaluation sheet as appropriate.
6. This evaluation is to be placed in the KUSCO's intern file for three years following the completion of each internship program.

To WEST Participants: At the mid-term and end of the internship, please fill out and return the Intern Evaluation Form to KUSCO, Responsible Officer, KUSCO, Email: west@kusco.org or Fax: (703) 847-8592. Please send the evaluation form no later than 3 days prior to your program midpoint and end date.

For more information, please contact Responsible Officer, KUSCO, and Email: west@kusco.org; Phone: (703) 942-8470. You may also refer to Code of Federal Regulations 22CFR62.22.

Internship Evaluation (for Intern)

Mid-Term Evaluation Report

Intern's Name: _____ Job Title (if applicable): _____

Intern's Email _____

Name of the Organization: _____

Organization Supervisor's Name: _____

Address of the Organization: _____

Phone Number of the Organization: _____

Rating Period: From _____ To _____ Total number of hours worked: _____

Hourly rate, stipend or any other benefits, if applicable: _____

1. What did you do to prepare for your internship?

2. How was your departure and arrival in U.S?

Internship Evaluation (for Intern)

Final Evaluation Report

Intern's Name: _____ Job Title (if applicable): _____

Intern's Email _____

Name of the Organization: _____

Organization Supervisor's Name: _____

Address of the Organization: _____

Phone Number of the Organization: _____

Rating Period: From _____ To _____ Total number of hours worked: _____

Hourly rate, stipend or any other benefits, if applicable: _____

1. What were your responsibilities?

2. What skills did you learn? Do you think that you will be able to apply them in your home country?

3. What aspect of your internship was most valuable to you?

4. Did your internship in any way encourage or discourage you from pursuing your intended career goals? Please explain.

5. Any changes (new roles and duties) in this internship since the time of the mid-term evaluation?

6. How was your language acquisition?

7. Do you have suggestions or comments as to how KUSCO might enhance the Internship Program to benefit your experience as an intern?

Supervisor: _____
Signature *Title* *Date*

Intern: _____
Signature *Date*

Please return to KUSCO, Email: west@kusco.org; Fax: (703) 847-8592