Agency Supervisor’s Evaluation of
Intern’s Project
Therapeutic Recreation Program
The University of Iowa

Intern Name

Agency ______________________ Agency Supervisor ______________________

This Evaluation is to be completed by the agency supervisor and discussed with the intern prior to submission to the university supervisor.

Please evaluate the intern’s performance as related to the Intern Project using the guidelines listed below. Did the intern:

• Assess the need for the project?
• Plan or design the project?
• Implement the project?
• Evaluate the strengths and weaknesses of the project?
• Conduct research on the project?
• Present written work related to the project?
• Work independently on the project?
• Work cooperatively with others as necessary on the project?
• Plan his or her work in advance so that work on the project could be spaced appropriately throughout the internship?

Was the project a learning experience for the intern?

Describe how the intern’s project contributes to your agency/department.

Circle the appropriate rating on the scale below.

Excellent Project is exemplary
Above Average Project exceeds expectations Satisfactory
Average Project meets minimum standards Below

Comments and/or observations: (attach on back side of this page)

__________________________________________ ________________
Agency Supervisor Date Intern

__________________________________________ ________________
Intern Date