

Intern Performance Review

Employee/Intern Information

Employee Name: _____ Employer: _____
Job Title: _____ Date: _____
Department: _____
Manager: _____
Review Period: _____ to _____

Review Guidelines

At least one week prior to this review, notify employee/intern of the review, and assign the employee/intern a self-review.

All goals should be reasonable and specific.

Goals

Briefly describe the goals of the employee. Were the goals achieved? If no, then why not?

Goal #1:

Goal #2:

Goal #3:

Additional Goals may be evaluated on back of this page:

Evaluation

Use this rating key for the following evaluation:

- 1 = *Unsatisfactory*
Does not perform required tasks. Requires constant supervision
- 2 = *Marginal*
Needs improvement in quality of work. Completes tasks, but not on time.
- 3 = *Meets Requirements*
Meets basic requirements. Tasks are completed on time.
- 4 = *Exceeds Requirements*
Goes above and beyond expectations.
- 5 = *Exceptional*
Always gets results far beyond what is required.

| | (5) = Exceptional | (4) = Exceeds Requirements | (3) = Meets Requirements | (2) = Marginal | (1) = Unsatisfactory |
|--|--------------------------|-------------------------------|-----------------------------|--------------------------|--------------------------|
| Achieves Set / Modified Goals & Objectives | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Open To Constructive Criticism | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Demonstrates Required Job Skills And Knowledge | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Demonstrates Ability to Learn and Develop New Skills | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Completes All Assigned Responsibilities | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Meets Attendance Requirements | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Takes Responsibility For Actions | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Recognizes Potential Problems And Develops Solutions | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Demonstrates Problem Solving Skills | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Offers Constructive Suggestions For Improvement | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Generates Creative Ideas And Solutions | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Provides Alternatives When Making Recommendations | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Displays appropriate level of professionalism in dress, speech and interactions | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Additional Comments:

Provide Suggestions For Self-Improvement:

Supervisor/Manager Feedback:

Verification of Review

By signing this form, you confirm that you have discussed this review in detail with your supervisor. Signing this form does not necessarily indicate that you agree with this evaluation.

I, _____ acknowledge receipt of review, and my signature does not necessarily indicate agreement.

Intern Signature *Date*

Supervisor Signature *Date*