

1.1 Internship Supervisor Evaluation Form

University of Twente

Mobility Office EEMCS/ ZILV 1018

Telephone: +31 53 489 3887

E-mail: Mobility-EEMCS@utwente.nl

Name student			
Start date internship		End date internship	
Company			

N.B. Please fill in this questionnaire as completely as possible. It will be treated as confidential.

EVALUATION:

	Excellent	Very good	Good	Satisfactory	Sufficient	Insufficient	Not Applicable
Adequate realization of the assignment							
Level of knowledge							
Technical insight							
Critical judgement							
Creativity							
Self-reliance							
Initiative							
Flexibility regarding problems and criticism							
Co-operation with colleagues							
Communication skills, oral							
Communication skills, written							
Total Impression							

REMARKS:

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Would you like to admit more students from the University of Twente in the future?

☐ yes, from the field of study: _____

☐ do not know yet, because: _____

☐ no, because: _____

Date: _____ Name supervisor: _____ Signature supervisor: _____