



## Pine Manor College Internship Program

# Site Supervisor Evaluation of Internship Program

Name \_\_\_\_\_ Telephone \_\_\_\_\_ Email: \_\_\_\_\_

Site Name \_\_\_\_\_

Address \_\_\_\_\_

Student Name \_\_\_\_\_

1. Did the Faculty Sponsor telephone you during the semester?

Yes

No

2. Did the Faculty Sponsor visit your site during semester?

Yes

No

3. Rate the amount of contact and support you received from the faculty.

Above  
Average

Average

Below  
Average

4. Did you receive materials and information in a timely manner? What other resources or materials would have assisted you in supervising your PMC intern?

Yes

No

5. Would you be interested in supervising a Pine Manor College intern in the future? Please explain.

Yes

No

Please suggest ways that Pine Manor College could improve the Internship Program.