|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Student Information** | | | | | | | | | | |
| **Name Surname** | |  | | | | | | Photo | | |
| **Student Number** | |  | | | | | |
| **Department** | |  | | | | | |
| **Phone Number** | |  | | | | | |
| **E-Mail** | |  | | | | | |
| **Address** | |  | | | | | |
| **Internship Start Date** | |  | | **Internship End Date** | | |  | | | |
| **Company Information** | | | | | | | | | | |
| **Company Name** | |  | | | | | | | | |
| **Phone Number** | |  | | | | | | | | |
| **Website** | |  | | | | | | | | |
| **Address** | |  | | | | | | | | |
| **S/N** | **INTERNSHIP SITE EVALUATION OUTCOMES** | | | | | **Evaluation Scale** | | | | |
| **Poor** | | **Fair** | **Good** | **Very Good** |
| 1 | Knowledge on current topics | | | | | 1 | | 2 | 3 | 4 |
| 2 | Willingness and ability to learn | | | | | 1 | | 2 | 3 | 4 |
| 3 | Fulfilling assigned responsibilities | | | | | 1 | | 2 | 3 | 4 |
| 4 | Ability to perform tasks | | | | | 1 | | 2 | 3 | 4 |
| 5 | Attendance | | | | | 1 | | 2 | 3 | 4 |
| 6 | Report formatting | | | | | 1 | | 2 | 3 | 4 |
| 7 | Report content | | | | | 1 | | 2 | 3 | 4 |
| 8 | Timely report submission | | | | | 1 | | 2 | 3 | 4 |
| 9 | Ability to apply math, engineering, and social sciences to engineering problems | | | | | 1 | | 2 | 3 | 4 |
| 10 | Identifying, interpreting, and solving engineering problems | | | | | 1 | | 2 | 3 | 4 |
| 11 | Ability to analyze and design a system or process to meet requirements | | | | | 1 | | 2 | 3 | 4 |
| 12 | Oral exam on activity report 1 (Date: ) | | | | | 1 | | 2 | 3 | 4 |
| 13 | Oral exam on activity report 2 (Date: ) | | | | | 1 | | 2 | 3 | 4 |
| **Department Internship Grade:** **100** **x** **(Sum of Evaluation Results / 52) / 2** | | | | | |  | | | | |
| **Grade Given by the Company: 100 x (Sum of Evaluation Results / 60) / 2** | | | | | |  | | | | |
| **Total Score** | | | | | |  | | | | |
| **Please provide your criticisms and suggestions regarding our intern student:** | | | | | | | | | | |
|  | | | | | | | | | | |
| **Department Internship Commission** | | | | | | | | | | |
| Chairperson    Name – Signature  **… /… /20...** | | | Member  Name – Signature  **… /… /20...** | | Member  Name – Signature  **… /… /20...** | | | | | |