

UNIVERSITY OF FLORIDA URBAN AND REGIONAL PLANNING
URP4942 COMMUNITY SERVICE EVALUATION FORM

Student Name _____ Agency/Organization Name _____

URP4942 Supervisor Name _____

The **EVALUATION FORM** is an evaluation of the student's performance and experience during the internship. This form can serve as an informal guide to the student's performance and the agency's support during the community service. It may be used by the department in assigning the student's final grade for the course. ***It is intended to be completed and signed by the host agency at the end of the semester***, and to be signed by the student and the department.

SCALE: (5) Excellent (4) Good (3) Average (2) Weak (1) Unsatisfactory (N/A) not able to judge/question is irrelevant

1. Was the student punctual?
2. Did the student model themselves after the professionalism of the agency's staff?
3. Did the student complete their work assignments in an efficient and timely manner?
4. Was the student able to work independently on job duties?
5. Was the student asked to do assignments that were appropriate to their capabilities?
6. Did the student interact well with other members of the staff?
7. Did the students's work performance meet the employer's standards?
8. Would you be willing to host a student(s) again next year?

Please sign the Evaluation below:

AGENCY SUPERVISOR _____

DATE _____

URP4942 INSTRUCTOR _____

DATE _____