

Eastern Illinois University
Mathematics and Computer Science Internship
Final Internship Report

Name of Intern: _____

Company/Institution: _____

Date internship work began: _____

Date internship ended: _____

Hours worked per week: _____

Please rate the intern on the following items:

	Excellent	Above Average	Average	Below Average	Unsatis- factory	Not Observed
Ability and knowledge						
Progress on assignment						
Compliance with standards						
Acceptance of responsibility						
Oral and written expression						
Accuracy and efficiency						
Preparation						
Cooperativeness						

Additional comments:

Recommended grade: Pass _____ Fail _____

 Supervisor's signature

 Title

 Date

Please return to: Intern Supervisor, Dept. of Math & Computer Science, Eastern IL University, Charleston, IL 61920