Intern: __________________________ Dates of Internship: __________________________

Internship Location: __________________________ Total Hours Worked: __________________________

Supervisor: __________________________ Position or Title: __________________________

Supervisor’s Signature __________________________ Date: __________________________

**Please evaluate the intern’s:**

Understanding of museum operations:
EXCELLENT _____ SATISFACTORY _____ NEEDS IMPROVEMENT _____ COMMENT: __________________________

Interaction with museum colleagues:
EXCELLENT _____ SATISFACTORY _____ NEEDS IMPROVEMENT _____ COMMENT: __________________________

Communication skills:
EXCELLENT _____ SATISFACTORY _____ NEEDS IMPROVEMENT _____ COMMENT: __________________________

Initiative:
EXCELLENT _____ SATISFACTORY _____ NEEDS IMPROVEMENT _____ COMMENT: __________________________

Organization and efficiency:
EXCELLENT _____ SATISFACTORY _____ NEEDS IMPROVEMENT _____ COMMENT: __________________________

Timeliness with assignments:
EXCELLENT _____ SATISFACTORY _____ NEEDS IMPROVEMENT _____ COMMENT: __________________________

Knowledge of subject matter or academic discipline (anthropology, art history, etc.):
EXCELLENT _____ SATISFACTORY _____ NEEDS IMPROVEMENT _____ COMMENT: __________________________

Attendance:
EXCELLENT _____ SATISFACTORY _____ NEEDS IMPROVEMENT _____ COMMENT: __________________________

Overall performance summary or other comments (continue on back if necessary):

**Please Return this form to:**
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Telephone 785-864-4543 museumstudies@ku.edu www.museumstudies.ku.edu