

WEST VALLEY COLLEGE
FASHION DESIGN AND APPAREL TECHNOLOGY DEPARTMENT

SUPERVISOR'S EVALUATION

Student's Name: _____ **Date:** _____

Name of Supervisor: _____ **Phone/Fax:** _____

Company Name: _____

Please rate each aspect of the Intern's performance:

A= Exceptional B= Competent C= Improvement needed D= Unsatisfactory

Quality of Work

Accuracy _____

Organization _____

Thoroughness _____

Job related skills _____

Adaptability

Performance in new situation _____

Performance under pressure _____

Performs with minimal instruction _____

Quantity of Work

Amount performed _____

Completed on schedule _____

obtains it

Work habits

Attendance _____

Degree to which Intern applies him/herself _____

Asks questions appropriately _____

Recognizes when guidance is needed and appropriately _____

General enthusiasm/interest in internship _____

Personal Relations

Receptive to criticism _____

Relations with coworkers _____

Relations with others _____

Personal appearance _____

Overall Evaluation

Exceptional _____

Competent _____

Improvement needed _____

Unsatisfactory _____

Comments: (You may attach additional pages if necessary)

Site Supervisor _____
Signature

Date: _____

Please fax to Sally Aitken, West Valley College. Fax: (408) 741-2415 **before** Dec. 7, 2004

Or mail to Sally Aitken, West Valley College, 14000 Fruitvale Ave, Saratoga, CA 95070