



Career Development
careers.dom.edu

Parmer Hall LL 010
7900 West Division Street
River Forest, Illinois 60305
708-524-6786

INTERNSHIP EVALUATION -- EMPLOYER

Dominican University appreciates the experience you have provided for our student. We are always striving to improve the quality of the internship program so that it benefits the student academically and benefits you, the employer, as a source of high quality temporary labor. Please give us your comments so we may continue to provide you with quality service.

STUDENT NAME: _____

INTERNSHIP EMPLOYER: _____

- | | | |
|--|-----|----|
| 1. Were you satisfied with the quality of the student? | YES | NO |
| 2. Would you hire this student on a permanent basis? | YES | NO |
| 3. Would you hire another Dominican student in the future? | YES | NO |
| 4. How has your business benefited from the work performed by the student? | | |

5. What were the strengths and weaknesses of this internship experience?

6. Other additional comments/suggestions:

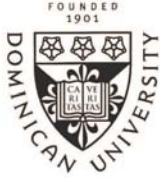
To what extent did the student participating in this internship exhibit:	Excellent	Above Average	Average	Below Average	Poor	Not Applicable
An appreciation of ethical dimensions in business applications.						
An ability to communicate effectively in writing.						
An ability to communicate effectively through oral presentations.						
An ability to utilize technology and electronic learning to address business applications.						
An ability to utilize quantitative and analytic methods in business applications.						
An ability to utilize critical thinking skills in business applications.						
An understanding of the global business environment.						
A technical knowledge of your discipline.						
An ability to apply theoretical knowledge in practical situations.						

EMPLOYER NAME: _____ **COMPANY NAME:** _____

EMPLOYER SIGNATURE: _____ **DATE:** _____

Please mail or fax to:

Career Development
 Dominican University – Parmer Hall LL 010
 7900 West Division Street
 River Forest, Illinois 60305
 FAX: 708-488-5075



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Student Hours Worked-Wages Paid Verification

Please complete the following information and fax the signed form to Career Development.

Student Name
Dates of Employment:
Total Hours Worked:
Gross Wages Paid:

Company Name

****Is this company a non-profit organization? Yes or No (please circle)**

Signature

Print

Title

Date

Thank you for providing a challenging opportunity for our student and we hope both you and the student benefit from this experience.

If you have any questions regarding the terms of the internship, please do not hesitate to call me at (708)524-6567. My fax number is (708) 488-5075.

Sincerely,

Sherri S. Wick

Associate Director, Career Development