

**EMPLOYER'S EVALUATION / REFLECTIVE LOG**

**Morris County School of Technology  
Mr. David Keidel, Internship / SLE Coordinator  
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NAME: \_\_\_\_\_ WEEK ENDING: \_\_\_\_\_

INTERNSHIP SITE: \_\_\_\_\_ MENTOR: \_\_\_\_\_

DAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY
Time In							
Time Out							
Total Hours Worked							

**TOTAL OF HOURS WORKED THIS WEEK:** \_\_\_\_\_

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**Mentor / Employer:** \_\_\_\_\_ **5- Above Average Worker**  
**Use the space below to evaluate the student intern** **4- Average Worker**  
**3- Below Average Worker**  
**2- Incompetent Worker**  
**N/A- Not Applicable**

Workplace Standards	5	4	3	2		N/A
Punctual / Good Attendance						
Cooperation w/ supervisor & co-workers						
Daily Performance of Assigned Tasks						
Produces required amount of work						
Respects equipment, materials, and work area						
Observes health / safety procedures						

**Commendations / Constructive Criticism from Internship Site Mentor:**

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

<b>Mentor's Signature:</b>		<b># hours you verify that student worked:</b>		<b>Date:</b>	
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Student Reflection: (Use the back of this form to continue your narrative)

- Describe work which used skills gained from your Academy Training
- Describe work which is developing new skill areas for you (be specific)
- What class activities still need to be taught to support your internship goals?
- Satisfaction / Concerns with Internship Site

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