

**EAST STROUDSBURG UNIVERSITY**  
**HOSPITALITY, RECREATION & TOURISM MANAGEMENT DEPARTMENT**  
**INTERNSHIP LEARNING CONTRACT**

**PART D – Internship Employer Evaluation Form**

Student Intern \_\_\_\_\_ Faculty Supervisor \_\_\_\_\_

Employer Supervisor (Name and Title) \_\_\_\_\_

Name of Organization \_\_\_\_\_

Directions: For each item below, indicate your rating of the intern student who works for you.  
SA=strongly agree, A=agree, D=disagree, SD=strongly disagree, NA=not applicable.

**The intern student I supervise:** SA A D SD NA

1. has adequately prepared for this job in terms of previous college course work .....SA A D SD NA
2. attends regularly and is punctual.....SA A D SD NA
3. works well with other employees .....SA A D SD NA
4. exhibits a positive attitude toward his/her work .....SA A D SD NA
5. maintains appropriate professional appearance .....SA A D SD NA
6. communicates clearly (either orally or in writing) .....SA A D SD NA
7. carries out assigned duties efficiently .....SA A D SD NA
8. does careful and thorough work.....SA A D SD NA
9. works well independently .....SA A D SD NA
10. takes initiative .....SA A D SD NA
11. shows an aptitude for this kind of work.....SA A D SD NA
12. has been an asset to the organization .....SA A D SD NA
13. Circumstances permitting, would you employ this person in a career position after graduation? Yes \_\_\_\_\_ No \_\_\_\_\_.

Additional comments: Please provide a candid assessment of this student's performance in areas which may or may not have been covered in the above questions.

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

Signature \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_

Please email to: lchiang@esu.edu  
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Department Chair and Internship Coordinator