

## J-1 STUDENT-INTERN FINAL EVALUATION FORM

TO BE COMPLETED BY FACULTY SUPERVISOR

**To the Faculty Supervisor:** In order to comply with J-1 Student-Intern regulations, please complete this form, review it with the Student-Intern, and assure that each of you signs it prior to the completion of the Student-Intern program. ISSS must receive a copy of this completed and signed form by the end date of the Student-Intern program.

We recommend that you refer to a copy of the completed original or revised DS-7002 while completing this form. Student-Intern Name **Faculty Supervisor Name Hosting Department** 1. Were each of the program goals and objectives specified on Form DS-7002 No completed? If no, please explain: 2. What social and/or cultural activities did the Student-Intern participate in? Yes 4. Would you host another Student-Intern in the future? No On a scale of 1 (Poor) to 4 (Excellent), rate the following aspects of the Student-Intern's performance: 5. The Student-Intern's overall progress throughout the course of the training program. 6. The Student-Intern's development of knowledge, skills, and techniques in the specific areas listed on the DS-7002. 7. How well the Student-Intern achieved the goals and objectives listed on the DS-7002. 8. The Student-Intern's adaptation to U.S. academic/work culture.

9. The Student-Intern's English communication ability.

| 10. Please add any comments about the Student-Intern:           |      |
|---|------|
|   |      |
|   |      |
|   |      |
|   |      |
|   |      |
|   |      |
|   |      |
|   |      |
|   |      |
|   |      |
|   |      |
|   |      |
|   |      |
|   |      |
|   |      |
|   |      |
|   |      |
|   |      |
|   |      |
|   |      |
|   |      |
|   |      |
|   |      |
|   |      |
| 11. Please add any comments about the Student-Internship progra | m:   |
|   |      |
|   |      |
|   |      |
|   |      |
|   |      |
|   |      |
|   |      |
|   |      |
|   |      |
|   |      |
|   |      |
|   |      |
|   |      |
|   |      |
|   |      |
|   |      |
|   |      |
|   |      |
|   |      |
|   |      |
|   |      |
|   |      |
|   |      |
|   |      |
|   |      |
|   |      |
|   |      |
| Signature of Faculty Supervisor                                 | Date |
| · ·   |      |
|   |      |
| Signature of Student-Intern                                     | Date |
|   |      |