CSUEAENTERTAINMENT INTERNSHIP
PROGRAM SUPERVISOR EVALUATION:

Please return this evaluation to CSUEAinternship@calstate.edu by
December 21, 2019 so the student may receive course and academic credit.
Thank you for your time & invaluable student mentoring!

Supervisor's Name:

Company & Department:

Phone & Email:

Intern's Name

Completed Internship Hours:

On a scale of 1 to 5, with 5 being excellent, please rate the student's overall performance:

On a scale of 1 to 5, with 5 being excellent, please rate the student's attitude and motivation:

What do you consider the student's greatest strengths?

The CSU Entertainment Alliance (CSUEA), 1600 Holloway Avenue, Burk Hall #259, San Francisco, CA 94132
www.csuentertainment.com

What do you consider the student's area/s for improvement? Did you experience any problems or issues with the student? If so, please explain.

What skills do you feel that our program should be teaching to provide the most qualified interns?

Do you have any suggestions that could improve/enhance the relationship between the CSU Entertainment Internship Program and your company?

Do you have any additional comments or thoughts?

Thank you for completing this form. The information provided will remain confidential.

Please email this form to CSUEAinternship@calstate.edu

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