


**HOPE COLLEGE**  
**DEPARTMENT OF COMMUNICATION**  
**INTERNSHIP PROGRAM**

**Student Midterm Evaluation**

Student Name:	Date:
Internship Site:	
Site Supervisor:	

**Please circle the number on the scale which best indicates your response to each item.**

	<i>Strongly Disagree</i>	2	<i>Neither Agree nor Disagree</i>	4	<i>Strongly Agree</i>
I like my internship.	1	2	3	4	5
I feel I am adequately prepared for my internship.	1	2	3	4	5
I am able to relate my internship to my communication courses.	1	2	3	4	5
My internship is meeting my expectations.	1	2	3	4	5
I feel I am fulfilling the requirements of my internship.	1	2	3	4	5
My site supervisor is actively involved in my internship.	1	2	3	4	5
The lines of communication are open between me and my site supervisor.	1	2	3	4	5
Attendance is stressed by my site supervisor.	1	2	3	4	5
Punctuality is stressed by my site supervisor.	1	2	3	4	5
My internship is sufficiently structured.	1	2	3	4	5
The lines of communication are open between me and the Communication Department Director of Internships.	1	2	3	4	5
I am learning a great deal from my internship work.	1	2	3	4	5
My internship is rewarding.	1	2	3	4	5

<i>Adapted from DePaul University College of Communication Internship Program with permission from Professor Karen M. Roloff, Director of Internships.</i>
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Do you have (or have you had) any problems at the internship? Explain the problems, how resolved, with whose help, etc.

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If you were to repeat this internship, what changes would you suggest?

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Reflecting back to Moodle Discussion Question #1, do you think you are accomplishing the personal learning goals and objectives established for the internship?

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Are there any additional work activities/projects at the internship in which you would like to get involved? How will you go about getting involved in these additional activities?

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**Please return this form to:** Director of Internships  
Department of Communication  
Hope College  
257 Columbia Avenue  
Holland, MI 49423

**This form is due on \_\_\_\_\_ at the midterm point of the semester.**  
(Date)