California State University, Sacramento  
Digital Video and Film Internship Form  
Supervisor's Evaluation of Intern

Intern: _______________________________________________________
Organization: _______________________________________________________
Supervisor: ___________________________ Title: ______________________

1. Please indicate the total hours completed by the intern at the end of the internship:
   50  100  150  200  250  300

2. This intern was employed from: ____/____/_____ to ____/____/_____ .

3. How valuable has this internship been for your organization?
   very valuable     valuable         not very valuable

4. Please rate the qualities of the intern's performance using the scale provided

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<th>Excellent 5</th>
<th>Very Good 4</th>
<th>Good 3</th>
<th>Poor 2</th>
<th>N/A</th>
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<tr>
<td>A. Interpersonal /Group competence (Relates well to other crew-members/co-workers, clients and public)</td>
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<td>B. The Student is competent in all applicable areas of digital video including pre-production, production and post production.</td>
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<td>C. Professionalism (Dresses appropriately, is punctual, displays positive attitude and confidence)</td>
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<td>D. Critical thinking competence (Solves problems resourcefully and creatively)</td>
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<td>E. Commitment to work (Accepts and follows through on assigned tasks)</td>
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<td>F. Student demonstrates an understanding of contemporary practices in digital video and film.</td>
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<td>G. Innovation and Creativity of Student</td>
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5. This intern's main responsibilities were:

6. In what ways do you feel that working with you has been educational for the intern?

7. Additional comments or concerns:

_________________________   _____________
Signature of Supervisor   Date

*Thank you for your feedback!*

Please return this survey by mail or fax:  Internship Coordinator Assistant
Department of Communication Studies
California State University, Sacramento
6000 J Street
Sacramento, CA 95819-6070
Or
Fax: (916) 278-7216