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| **Ritsumeikan Asia Pacific University (APU)**  **Graduate School of Management (GSM)**  **Internship Supervisor Report on the Intern’s Performance** |

Please evaluate the student’s performance upon completion of the internship. Kindly complete and return this form and the attached rubric. Additional comments are most welcome.

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| **Organization/**  **Company Name** |  | **Company Seal** |
| **Business Address**  (incl. country, zip, city, state) |  |
| **Department** |  |
| **Telephone & Email** |  |
| **Supervisor Name** |  | |
| **Supervisor’s Position** |  | |

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| **Intern Name** | | | | Family Name 　　　　　　　　　 First Name | | | | | | |
| **Period of the Internship** | Month | Day | Year | | -- | Month | Day | Year | **Total hours** | **hrs** |
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| List the intern’s duties, responsibilities, strengths and limitations. (Please provide additional comments.) |
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| Please feel free to make any suggestions that you feel would improve our internship program. |
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| Internship Supervisor Signature |  |  | Date (mm/dd/yy) |  |