**Accounting Internship Evaluation Form**

Student Intern’s Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ UT EID \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Employer/Firm \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Supervisor (Person completing form) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ E-mail Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Internship Start Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Internship End Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Area of Work (i.e., Tax, Audit, etc.) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***Please provide your assessment of the intern’s performance during his/her internship by responding to the following questions.\* (Circle the appropriate number)***

**1. Academic preparation for internship experience.** *Excellent Average Poor* 1 2 3 4 5

**2. Motivation and attitude.** *Excellent Average Poor* 1 2 3 4 5

**3. Interpersonal skills.** *Excellent Average Poor* 1 2 3 4 5

**4. Oral Communication skills.** *Excellent Average Poor* 1 2 3 4 5

**5. Written communication skills.** *Excellent Average Poor* 1 2 3 4 5

**6. Excel skills.** *Excellent Average Poor* 1 2 3 4 5

**7. Research skills** (issue identification, analysis, and/or resolution) *Excellent Average Poor Unknown* 1 2 3 4 5 6

**Areas of strength:** (Use additional pages as necessary.)

**Areas of weakness:** (Use additional pages as necessary.)

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*Signature Title Date*

*Please return this form within two weeks of the* ***end*** *of the internship to:*

|  |  |  |
| --- | --- | --- |
| **via Mail** | **via Courier** | **via Fax** |
| Internship CoordinatorMPA Program OfficeDepartment of AccountingMcCombs School of BusinessThe University of Texas at Austin1 University Station, B6400Austin, TX 78712-0211 | Internship CoordinatorMPA Program OfficeDepartment of AccountingMcCombs School of BusinessThe University of Texas at Austin21st & Speedway, GSB 4.112CAustin, TX 78712 | 512-471-3365 |

\*Please note:  Since internships are an important part of our students’ educational experience, we strongly request that your share your candid feedback with them regarding their work strengths and areas for improvement.  Should the student request a copy of this evaluation form, it will be given to them as it is a part of their academic record.