

## **Evaluation Form**

(To be filled out by the Internship Supervisor and sent to INATEL right after the end of the internship, in sealed envelope or by mail).

Name of the Intern:					
Name of the Company:	Area/Section:				
Period of Internship: from/ to/	/				
Number of hours effectively carried out:					
Eva	luation				
Items	Excellent 10	Very good 8	Good <u>6</u>	Regular 4	Fair <u>2</u>
Necessary skills to do the activities					
Cooperation: disposition to answer the requests promptly					
Performance, achievement and quality of work					
Commitment, monitoring and controlling of his/her activities  Disposition to learn					
Problem analysis and search for innovative solutions					
Assiduousness and punctuality					
Communication skills					
Interpersonal relationship					
Discipline according to the internal rules					
Evaluation done by:					
The intern developed the following activities:					
Date:/					
Company stamp	Supervisor's signature				