

**Department of Biology
Ball State University
BIO 369/669 Internship, BIO 394/694 Practicum in Biotechnology
Employer Evaluation Form**

Please return this form to: Biotechnology Internship Coordinator, Department of Biology, Ball State University, Muncie, IN, 47306. Fax: 765-285-8804. Responses from this evaluation will not be used in determining grade of this course.

Name: _____ Date: _____

For each of the following statements, circle your answer with 5=strongly agree, 4=agree, 3=undecided, 2=disagree, 1=strongly disagree, and 0=not applicable (not able to evaluate).

I am satisfied with the	SA	A	U	D	SD	NA
1. Amount of information available regarding internship possibilities	5	4	3	2	1	0
2. Reporting requirements for the internship program	5	4	3	2	1	0
3. Level of support demonstrated by my internship coordinator	5	4	3	2	1	0
4. Availability of the internship coordinator in discussing requirements	5	4	3	2	1	0
5. Amount of practical work experience gained during the internship	5	4	3	2	1	0
6. Level of support demonstrated by my supervisor	5	4	3	2	1	0
7. Amount of feedback I've received from my supervisor	5	4	3	2	1	0
8. Amount of work required by my supervisor	5	4	3	2	1	0
9. Opportunity to apply what I've learned in the classroom	5	4	3	2	1	0
10. Educational preparation I received prior to the internship	5	4	3	2	1	0
11. Manner in which I performed as an intern	5	4	3	2	1	0
12. Amount of time required to complete internship objectives	5	4	3	2	1	0
13. Level of compensation received during the internship	5	4	3	2	1	0
14. Amount of information available through BSU's Career Services	5	4	3	2	1	0
15. Manner in which the internship has prepared me for my career	5	4	3	2	1	0
16. Overall quality of the internship	5	4	3	2	1	0

Please explain any statement with which you disagreed or strongly disagreed. Please use the back of this form if necessary.